

STATE OF LOUISIANA – INVITATION FOR BID



PROPOSAL NO.: CR-18

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PROPOSAL MUST BE RECEIVED NO LATER THAN

TIME:

10:00 A.M.

DATE:

May 7, 2002

FOR INFORMATION CONTACT:

Mr. Tommy Arbour

PHONE NUMBER:

(225) 342-8414

This document constitutes an invitation to submit sealed bids, including prices, from qualified individuals and organizations to furnish those services and/or items described herein.

Proposals **must** be mailed to the Office of the Governor, Division of Administration (D0A), Office of Risk Management or hand carried to its offices at 626 North Fourth Street, 4th Floor, P. O. Box 94095, Baton Rouge, Louisiana 70804-9095.

STATE OF LOUISIANA – VARIOUS STATE DEPARTMENTS, AGENCIES, BOARDS AND COMMISSIONS

FOR:

FOLLOWING FORM EXCESS COMMERCIAL CRIME COVERAGE(S) – AS SCHEDULED

CONTRACT PERIOD:

Policy to be effective for the period of 12:01 A.M. July 01, 2002 to 12:01 A.M. July 01, 2003 with two (2) one-year options to continue at the same rates. Bids will be received up to **10:00 A.M., May 7, 2002** by the Administrative Section of the Office of the Governor, Division of Administration, Office of Risk Management, 626 North Fourth Street, 4th Floor, Baton Rouge, Louisiana. At the same hour of the same day and date bids will be publicly opened and read in the conference room at the Division of Administration, Office of Risk Management address. Bids received after this time will be returned to the bidder/contractor unopened.

BIDDER/CONTRACTOR INFORMATION/SIGNATURE:

The bidder hereby agrees to provide the insurance coverage and related services, at the prices quoted, pursuant to the requirements of this document and further agrees that when this document is countersigned by an authorized official of the *State of Louisiana*, a binding contract, as defined herein, **shall** exist between the bidder and the *State of Louisiana*.

Insurance Agency Name

Signature of Designated Authorized Insurance Agency Representative

Print Name

Title

Mailing Address (Bidding Agency)

Telephone

City

State

Zip Code

THE FOLLOWING SECTION IS FOR STATE OF LOUISIANA USE ONLY

NOTICE OF AWARD:

PROPOSAL NUMBER:➔

CR-18

This proposal is accepted by the *State of Louisiana* as follows:

STATE RISK UNDERWRITING SUPERVISOR

STATE RISK DIRECTOR

DATE

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**STATE OF LOUISIANA
OFFICE OF RISK MANAGEMENT (ORM)**

PART I

TERMS AND CONDITIONS OF AN INVITATION FOR BID

1. Terminology of an Invitation for Bid (IFB)

Throughout this document the words "bidder", "contractor", and "policy" may pertain to one or more bidder(s), contractor(s), or policy(ies).

Whenever the following words and expressions appear in an Invitation for Bid document or any amendment, exhibit, or attachment thereto, the definition or meaning described below **shall** apply.

- 1.1 Authorized** - Is an admitted or non-admitted insurance company approved by the Commissioner of Insurance to do business in the *State of Louisiana*.
- 1.2 Bid Close Date and Time and Similar Expressions** - The exact deadline required by the IFB for the physical receipt of bids by the Division of Administration (DOA), Office of Risk Management in its office.
- 1.3 Bidder** - The person or organization that responds to an IFB with a proposal and prices to provide the service, supplies, or equipment as required in the IFB document. **All provisions contained in this solicitation, which are addressed to the bidder, shall apply equally to the contractor.**
- 1.4 Budget Agency or State Budget Agency** - Any unit of state government in the *State of Louisiana* for which the policy of insurance and service is being purchased by the OFFICE OF RISK MANAGEMENT sometimes hereinafter referred to as ORM.
- 1.5 Buyer** - The procurement staff member of ORM.
- 1.6 Contractor** - The person or organization who enters into a legally binding contract thereby agreeing to perform a service and/or to furnish supplies or equipment in return for the payment of money and includes the bidding agent or agency and the insuring company whose names appear on the cover sheet and EXHIBIT III of the invitation for bid. **All provisions contained in this solicitation, which are addressed to the contractor, shall apply to the bidder.**
- 1.7 Guaranteed Cost** - Premium charged on a prospective basis, fixed or adjustable, or on a specified rating basis, but never on the basis of loss experience. In other words, the cost is guaranteed to the extent that it will not be adjusted based on the loss experience of the insured during the period of coverage. The rate(s) **must** remain fixed during the contract period.
- 1.8 Invitation for Bid or IFB** - Those procurement documents issued by ORM to potential bidders/contractors for the purchase of insurance coverage and related service as described in the document. The definition includes all attachments, exhibits, schedules, supplemental pages, and/or amendments thereto.
- 1.9 Manuscript Endorsement** - Any unprinted, typed endorsement changing any conditions, agreements, exclusions or warranties of the contract.
- 1.10 Must and Shall** - When these words are used the performance of a certain act is a mandatory condition and **shall** be performed exactly as described.
- 1.11 Designated Authorized Representative** - When used in regards to the insurance company or an incorporated insurance agency, these words mean an elected corporate officer with power of attorney for the insurance company/agency. The requirements of power of attorney are specified in PART IV, Section 3 of these specifications. When used in regards to an unincorporated

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insurance agency, these words mean the owner of the agency.

2. Open Competition

- 2.1 It is the intent and purpose of ORM that the Invitation for Bid permits free and open competition. However, it **shall** be the bidder's/contractor's responsibility to advise ORM if any language, requirements, etc., or any combination thereof, inadvertently restricts or limits the requirements to a single source or otherwise unduly or unnecessarily prohibits the submission of a bid. The notification **must** be received by ORM within ten (10) calendar days prior to the bid close date and time. Bidders are requested to bring to the attention of ORM any perceived problems with these specifications at the earliest possible opportunity in order to allow clarification or amendment with minimum disruption to the bid process.

3. The Invitation for Bid Document (IFB)

- 3.1 The IFB contains two basic types of requirements and information, although it may be organized into several parts. One type consists of the scope of work (technical requirements) and related contractual commitments with which the bidder/contractor **must** comply if awarded a contract. The other type consists of those basic instructions and procedural requirements which **must** be observed and satisfied by the bidder/contractor when submitting a bid for consideration.
- 3.2 The IFB or a Notice to Bidders is mailed to persons and organizations at the address currently on file with the DOA, Purchasing Section. If any portion of the address is incorrect, the bidder/contractor **must** notify the buyer upon receipt of the document. Any subsequent amendment to an IFB will be mailed to the same address as the original IFB unless otherwise notified.
- 3.3 Additional copies of the bid proposal forms, information, specifications and subsequent amendments may be obtained on line at <http://www.state.la.us/orm/uwbids.htm>.

4. Amendments to an Invitation for Bid

- 4.1 ORM reserves the right to officially modify (or cancel) an IFB after issuance. Such a modification shall be identified as an amendment and numbered in a sequential order as issued.
- 4.2 If bidder/contractor has not received all amendments which have been issued by ORM, it is the bidder's/contractor's responsibility to contact ORM to obtain a copy(ies) of the amendments. If the designated authorized representative of the insurance agency fails to acknowledge receipt of all amendment(s) by signing the amendment(s) in the designated area and returning same with bid response, the bidder's/contractor's submission will not be considered a responsive bid.
- 4.3 The designated authorized representative of the insurance agency may acknowledge the acceptance of the conditions of an amendment...by telegraphic notice or electronic mail services if issued to and physically received in the Office of Risk Management - Administrative Section no later than the official bid close date and time. Verbal messages from either a telegraph company or the bidder/contractor shall not be permitted or considered as an acceptance of an amendment.

5. Questions by Bidders

- 5.1 Any questions related to an IFB **must** be directed to the buyer in ORM whose name appears at the top of the form on page 1. Prior to the award of the IFB, the bidder/contractor **shall** not contact nor ask questions of the State agency for which the required insurance is being procured, unless so stated elsewhere in these specifications. **Questions shall be submitted in writing and will be answered in writing in the form of an amendment and forwarded to all vendors who were mailed an IFB.** Any correspondence related to an IFB should refer to the appropriate IFB number, page and paragraph number, etc. However, do not place the IFB number on the outside of the envelope containing questions since such an envelope will be identified as a sealed bid and will not be opened until after the official bid close date and time. Correspondence should be mailed to the Office of Risk Management, P. O. Box 94095, Capitol Station, Baton Rouge, LA 70804-9095.

5.2 All questions **must** be received by ORM at least fifteen (15) calendar days prior to the bid opening date. All answers will be mailed to the vendors at least ten (10) calendar days prior to the bid opening date.

5.3 Questions will also be permitted at Pre-Bid Conferences when scheduled. If scheduled, the IFB will contain the date, time, and location of the Pre-Bid Conference; attendance will be at the bidder's/contractor's expense. The bidder/contractor should bring a **copy** of the IFB since it will serve as the agenda. However, since impromptu questions may be asked and since spontaneous answers may be given, the only official position of ORM or a State agency **shall** be the position or answer issued to bidders/contractors in writing. Transcripts are not made nor issued to bidders/contractors.

6. Instructions for Submission of Bid(s) by Bidders/Contractors

6.1 A proposal submitted **must** be manually signed in ink by the designated authorized representative of the insurance agency and the insurance company. ORM will accept either the original insurance company designated authorized representative's signature submitted with the bid response or a facsimile copy of the insurance company designated authorized representative's signature on EXHIBIT III in lieu of an original signature. The original of EXHIBIT III containing the insurance company designated authorized representative's original signature **must** be received at ORM's office within ten (10) working days after the bid opening date. Failure to timely submit said original of EXHIBIT III may result in rejection of the bid. Submission of a bid bond in compliance with PART IV, Item 3 of these specifications does not eliminate the requirement of a company and an agency signature; however, the submission of a bid bond allows any authorized person from the company and the agency to sign the invitation in lieu of the designated authorized person.

6.1.1 The designated authorized representative of the insurance agency **shall** manually sign in ink the following:

6.1.1.1 Form ORM-02

6.1.1.2 Any amendments to the specifications

6.1.2 The designated authorized representative of the insurance company **shall** manually sign in ink the following:

6.1.2.1 EXHIBIT III

6.2 All attachments **shall** be returned as follows:

6.2.1 **Must** contain all information required by the IFB.

6.2.2 The bid **shall** be priced as required in the IFB.

6.2.3 **Must** be sealed in an envelope or box with security deposit attached, if required.

6.2.4 **Must be delivered to the Office of Risk Management - Administrative Section and officially clocked in no later than the exact time on the date as specified in the IFB.**

6.2.5 Entire IFB and Amendment (if applicable) shall be returned except as otherwise provided in these specifications.

6.3 THE SEALED ENVELOPE OR BOX CONTAINING AN IFB SHALL BE CLEARLY MARKED ON THE OUTSIDE BOTTOM LEFT CORNER WITH THE FOLLOWING:

6.3.1. THE OFFICIAL IFB PROPOSAL NUMBER.

6.3.2. THE OFFICIAL CLOSE DATE AND TIME.

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- 6.4 Please submit your bid with pages numbered in the bottom right-hand corner of each page in the following manner: 1 of 4, 2 of 4, etc.**

7. Proposal Opening

- 7.1** Shortly after the expiration of the official bid close date and time, bids will be opened. The bidders/contractors and the public are invited, but not required to attend the formal opening of bids. Prices will be read aloud to the public. However, no decisions related to an award of a contract **shall** be made at the opening.
- 7.2** Due to manpower limitation, buyers shall not repeat prices after an opening via telephone request. Please do not make such requests. However, upon written request a photocopy of the Summary of Quotations shall be mailed to interested bidders/contractors.

8. Late Proposals

- 8.1** Any bid received by the DOA, Office of Risk Management after the exact bid closing date and time **shall** not be opened and **shall** not be evaluated regardless of the reason and mitigating circumstances related to its lateness or degree of lateness.
- 8.2** It is the bidder's/contractor's sole responsibility to insure that the proposal is physically received and officially clocked in as a sealed document by the DOA-Office of Risk Management in its offices no later than the official close date and time. Late bids **shall** be returned to bidders/contractors unopened.

9. Rejection of Bids

An invitation for bids, a request for proposals, or other solicitation may be canceled or all bids or proposals may be rejected, if it is determined in writing by the chief procurement officer or his designee that such action is taken in the best interest of the State.

10. Public Notice of Awards

- 10.1** ORM has no facilities for furnishing abstracts of bids; a complete record of all bids is on file in this office subject to inspection of any citizen who is interested in investigating, for any purpose, the record of State purchases.
- 10.2** Bidders are permitted to review competitors' bids and evaluate documents in accordance with the provisions of the Public Record Act, Louisiana R.S. 44:1 et. seq. Such review **must** be conducted on site in ORM in accordance with the public records statutes.

11. Non-Award of Contract Due to Insufficient Funds

ORM reserves the right to reject the bid for insurance coverage if the insured(s) does/do not have sufficient funds available with which to pay the premium.

12. Contract Resulting From an IFB

- 12.1** The bidder/contractor is advised that the *State of Louisiana* does not sign standard contract forms. The IFB document issued by ORM contains signature lines for the designated authorized representative of the insurance agency and of the insurance company which **shall** be signed when submitted as a bid. Immediately below the bidder's/contractor's signature line is a section entitled "Notice of Award" which contains signature lines for officials of the *State of Louisiana*. To consummate a contract, officials of the *State of Louisiana* need only to sign the Notice of Award section of the form.
- 12.2** Be aware that the actual contract between the *State of Louisiana* and the bidder/contractor

shall consist of the following documents: (1) IFB and any amendments issued thereto, (2) the proposal submitted by the bidder/contractor in response to the IFB, (3) the actual policy issued. In the event of a conflict in language between items 1, 2, and 3 referenced above, the provisions and requirements set forth and/or referenced in the IFB shall govern. ORM reserves the right to clarify any contractual relationship in writing and such written clarification shall govern in case of conflict with the applicable requirements stated in the IFB and the bidder's/contractor's proposal. In all other matters not affected by the written clarification, if any, the IFB shall govern. The refusal of the bidder/contractor to conform to the provisions and requirements set forth and/or referenced in the IFB shall result in the award of the contract to the new lowest bidder/contractor. The bidder/contractor is cautioned that its proposal shall be subject to acceptance by ORM without further clarification. In the event of any discrepancies between the insurance requirements delineated in these bid specifications and the model policy provided herein, the bid specifications shall govern.

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PART II

TECHNICAL SPECIFICATIONS

1. General Specifications

- 1.1** The bidder/contractor **shall** provide **Following Form Excess Commercial Crime Coverage(s)** for *State of Louisiana*, Various State Departments, Agencies, Boards and Commissions (as Scheduled) .
 - 1.1.1** The bidder/contractor **shall** agree that underwriting information provided in the schedule is believed to be correct and it **shall** not be considered in any way a warranty by ORM and **shall** not impair the rates for the insurance coverage based upon the information provided.
 - 1.1.2** Bids submitted by admitted companies (including reinsurance carriers which desire to submit bids for any coverage layer requested or excess of any coverage layer requested) licensed to do business in the *State of Louisiana* possessing a **Best's Insurance Reports policyholder's current rating of "A++", "A+", "A" or "A-", with a financial rating of Class VIII or higher will be considered first.** Surplus line companies or non-admitted companies possessing a **Best's Insurance Reports policyholder's current rating of "A++", "A+", "A" or "A-", with a financial rating of Class VIII or higher** will be considered and accepted only if acceptable bids are not tendered by an admitted company. The bidding company **shall** meet the qualifications mentioned above without regard to any cut-through endorsements to a higher company. Direct quotations from companies (including reinsurance carriers) **shall** be considered an alternate bid. Mutual companies which write assessable insurance policies are not acceptable and will not be considered for award of the bid.
- 1.2** The contract and policy term **shall** be for the period of time as reflected under EXHIBIT I.
- 1.3** Invoices for policies delivered and accepted **shall** be submitted (in duplicate) by the bidder/contractor on its own form directly to ORM, Division of Administration.
- 1.4** **Premiums for each State budget agency shall be computed separately where policies of insurance cover more than one State budget agency.**
- 1.5** **Contractor shall be required to furnish closure claims settlement notices to ORM, Division of Administration, on all settlements of claims and a quarterly report reflecting claims opened and closed and claims reserved and paid per agency by policy year including all allocated loss adjustment expenses until all claims are closed.**
- 1.6** All books and records of transactions under this contract **shall** be maintained by the bidder/contractor for a period of five (5) years from the date of the final payment under the contract.
- 1.7** ORM will execute any "A" rate form necessary to enable the underwriter to comply with any premium charge quoted and preclude any violation of rating bureau requirements (if applicable).
- 1.8** **The contractor shall make special filings of policy forms with the Louisiana Department of Insurance as needed to comply with coverage requested in these specifications prior to the issuance of the policy.**
- 1.9** At the request of ORM, the insurance policy issued to include coverages as reflected in PART IV, of these specifications will be revised by way of endorsements to the policy extending or deleting coverage as a result of any changes in units of exposure, if needed.
- 1.10** A bidder/contractor offering a direct sale of insurance to the State should have reduced the policy

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premium by the amount of the commission which would have been paid, as indicated by Louisiana R.S. 39:1631.

- 1.11** "It **shall** be unlawful for an agent (bidder/contractor) to split, pass on or share with any person, group, organization or other agent, except the *State of Louisiana*, all or any portion of the commission derived from the sale of insurance to the State..." Louisiana R.S. 39:1632.

2. General Required Endorsements

The "policy of insurance" as used in this section **shall** mean policy issued by the successful bidder/contractor.

- 2.1** The cancellation provisions of the policy of insurance shall be replaced with the following: **"It is agreed that the guidelines set forth in this policy as regards cancellation of coverage are set aside and shall be inoperative to the extent that they are in conflict with the following verbiage:**

The insured may cancel the policy by returning it to the company or by giving the company advance notice of the date cancellation is to take effect. The company may cancel or non-renew the policy by mailing to the insured by "Certified Mail, Return Receipt Requested" (at the insured's last known address by the company) written notice of cancellation at least:

Thirty (30) days before the effective date of cancellation if cancellation is due to nonpayment of premium; or

One hundred-twenty (120) days notice if cancellation or non-renewal is due to any other reason.

The company may deliver any notice instead of mailing it. A signed return receipt will be sufficient proof of notice. The effective date of cancellation stated in the notice shall become the end of the policy period."

- 2.2** Blank

- 2.3** Blank

- 2.4** Blank

- 2.5** Blank

- 2.6** The policy of insurance **shall** include this endorsement: **"For the insurance afforded herein, the State Risk Director for the Office of Risk Management/Division of Administration, *State of Louisiana* is authorized to act for all insureds respecting the giving and receiving of notice of cancellation, non-renewal or material change, receiving any return premium or dividend, and changing any provisions of this coverage. Such notice or changes shall be mailed in care of the Office of Risk Management, Division of Administration, Post Office Box 94095, Capitol Station, Baton Rouge, LA 70804-9095."**

- 2.7** Blank

3. Special Required Endorsements

- 3.1** The Policy of insurance **shall** include this endorsement:

"For the insurance afforded herein, the Company *shall not* be liable under Form B (CR 00 03 01 86), Form C (CR 00 04 10 90), and Form D (CR 00 05 10 90) on account of any loss, except

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to the extent such loss is in EXCESS of Fifty Thousand and No/100 Dollars (\$50,000), with the insurance then applying to such excess only, subject otherwise to the applicable limit of the company's liability."

3.2 Policy of insurance **shall** include this endorsement:

"It is agreed that Form C (CR 00 04 10 90) and Form D (CR 00 05 10 90) do not apply to loss of covered property which has been transferred to a person or to a place outside the covered premises *on the basis of unauthorized instructions*."

3.3 Policy of insurance shall include this endorsement:

RECORD OF CHECKS ENDORSEMENT

It is agreed that the requirement(s) of the policy regarding the keeping of records by the insured, is amended by the addition of the following provision:

As respects checks negotiated to the insured, the record shall:

- (a) be made prior to the close of each business day;
- (b) each check will be stamped "For Deposit Only" immediately upon the negotiation;
- (c) include the names of the maker, payee and drawee bank, and the date and amount of the check;
- (d) be maintained in a receptacle other than that used for money and securities."

3.4 Policy of Insurance **shall** include this statement:

"It is agreed that while the scheduled premises are not opened for business and a Custodian is not on duty therein, the limit of liability applicable to loss of Money or Securities within such scheduled premises is reduced to the applicable limit stated below:

PREMISES: All Premises with a Locked Safe or Vault.
This does not apply to a locked filing cabinet or locked desk.

LIMIT OF INSURANCE: \$50,000 (This limit is \$50,000 excess of \$50,000 Self-Insurance Limits.)

3.5 Policy of insurance **shall** include this endorsement:

"It is agreed and understood that:

- A. Coverage extended in this policy does not cover messengers other than salaried employees of the insured. Be it further agreed that coverage provided does not extend to tickets or sporting events.
- B. Messengers coverage extended to cash items (excess over \$50,000 Self Insurance Coverage) are limited as follows:
 - a. when exposure reaches \$15,000, one (1) guard;
 - b. when exposure reaches \$35,000, two (2) guards:

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c. when exposure reaches \$75,000, three (3) guards will accompany the messenger.

C. For the purpose of this policy, a guard is to be construed as an Armed Campus Security Officer or local Police Officer."

4. Delivery Dates and Location

- 4.1 The policy of insurance **shall** be received by ORM within forty-five (45) days from the inception date of the policy and **shall** not be delivered to any other State agency.
- 4.2 Coverage binder **shall** be received by ORM within five (5) days of the date award is made.
- 4.3 **Bidder/Contractor shall issue endorsement(s) to any additional insured(s) as requested by the Named Insured.**
- 4.4 This is a request for a guaranteed cost for one (1) year policy in effect from July 01, 2002 to July 01, 2003 with two one-year options to renew at the same rates.

5. Claims Service

- 5.1 The bidder/contractor shall provide claims service for the Following Form Excess Commercial Crime coverage.
- 5.2 The claims service shall be responsible for the handling of our claims to their conclusion in a professional manner. Should the contract be terminated the bidder/contractor **shall** remain responsible for occurrences that take place during the policy period.
- 5.3 The contractor **shall** furnish an adjusting firm, with ORM's concurrence, having qualifications equal to a general adjuster specializing in crime coverage with the ability to perform inspections within twenty-four (24) hours after notification of loss, upon the request of ORM. The insured **shall** report all losses to the agent-of-record (contractor). The company **shall** not contest any settlement made by ORM unless written notice of its intent to participate in the loss adjustment has been made within fourteen (14) days after receipt of the Property Loss Notice to the agent-of-record.
- 5.4 The following guidelines **shall** be followed for the handling of claims:

| ORM Estimated Claim Value | Adjusting Service |
|---------------------------|---|
| \$0 to \$50,000 | ORM shall have the option to assign to outside selected/approved adjuster or to keep in house. |
| \$50,000 and above | Claims shall be handled by outside selected/approved adjuster. |

- 5.5 ORM **shall** be responsible for payment of the outside adjusting cost for all claims which fall below our retention (\$0 to \$50,000). Contractor **shall** be responsible for the payment of outside adjusting cost for all claims which exceed ORM's retention (\$50,000 and above). **Contractor agrees to reimburse ORM for claims service expenditures as regards any claim which exceeds ORM's Retention.**
- 5.6 **Outside adjusting costs are defined as any necessary expenditures incurred in determining the value of the loss. They may include, but not necessarily be limited to Experts, Consultants, Economist, Investigators, Surveillance, and others.**

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6. Blank

7. **Rates**

- 7.1 The contractor **shall** provide ORM with the rate(s) per unit of exposure corresponding to premium indicated on EXHIBIT I as regards Following Form Excess Crime Coverage(s). The rate(s) **shall** be indicated on EXHIBIT II of these specifications.

PART III

GENERAL CONTRACTUAL REQUIREMENTS

1. Bidder/Contractor **shall** be bound by the provisions of Louisiana R.S. 39:1551, et. seq., (The Louisiana Procurement Code).
2. Unless otherwise provided by law, a contract for services may be entered into for periods of not more than three years. No contract **shall** be entered into for more than one year unless the length of the contract was clearly indicated in these specifications. At the option of the *State of Louisiana* and upon acceptance by the bidder/contractor, any contract awarded for one year may only be extended for two additional twelve-month periods -- not to exceed a total contract period of thirty-six months.
3. **Appropriation Dependency Clause**
 - 3.1 The continuation of this agreement is contingent upon the appropriation of funds, to fulfill the requirements of the agreement, by the legislature. If the legislature fails to appropriate sufficient monies to provide the continuation of this agreement, or if a lawful gubernatorial order issued in or for any given fiscal year during the term of this agreement, reducing the funds appropriated in such amounts as to preclude making the payments set out herein, the agreement **shall** terminate on the date said funds are no longer available without any liability incurring onto the State other than to make payment for services rendered prior to the termination date.
 - 3.2 However, the State **shall** be under a duty to make such determination only in good faith and not, arbitrarily and without justification, to cancel this agreement for the sole purpose of acquiring from another vendor other products of comparable quality and value, and the State agrees that it will use its best efforts to obtain approval of necessary funds to fulfill the obligations of this agreement by taking the appropriate action to request adequate funds to continue this agreement.
4. Endorsements extending and/or deleting coverage which are issued to the policy of insurance **must** reflect any increases or decreases in the amount of the bidders'/contractors' compensation (premium) and **shall** serve to modify or amend the premium as reflected on EXHIBIT I of these bid specifications. No other method, and/or no other document, including correspondence, acts and oral communications by or from any person, **shall** be construed as a modification or supplementation of the contract except as herein delineated as regards amendments and endorsements.
5. In the event the company or companies originally contracted with by ORM fail(s) to perform, ORM **shall** allow substitution for such company or companies if the parties sought to be substituted meet other criteria established by these specifications. In the event substitution of company or companies occur, company signature pages signed by the replacement company or companies **must** also be submitted to ORM.

| | | | | | | |
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PART IV

GENERAL BID INFORMATION

1. Special Instructions to Bidder

- 1.1** The bidder/contractor **must** respond to this IFB by submitting all data required herein in order for this bid to be evaluated and considered for award. Failure to submit such data **shall** be deemed sufficient cause for disqualification of a bid from further consideration of award.
- 1.2** The bidder/contractor **shall** provide Following Form Excess Commercial Crime Coverage which **must** equal or exceed the coverage provided in the underlying self-insurance policy issued by ORM and reflected in Schedule B of these specifications.
- 1.3** Any change or restriction in conditions, warranties, or exclusions from the underlying policy (found elsewhere in these specifications) or from these specifications **must** be completely explained in writing and attached to the bid. Any such deviations which provide less coverage and/or service than that required in the underlying policy and/or these bid specifications **shall** be considered an alternate quotation. Any such change or restriction **shall** be indicated on EXHIBIT V of these specifications. **Submission of sample policy(ies) and/or service narrative shall not be considered to be in compliance with the above stipulations.**
- 1.4** ORM reserves the right to reject any or all bids.
- 1.5** Bidder/Contractor is bound by all of the terms, prices and conditions of its bid for a term of sixty (60) days after bid opening. No bid may be withdrawn prior to the expiration of that sixty (60) day period.
- 1.6** Bids will be awarded by competitive sealed bidding, pursuant to R.S. 39:1594. Only dollar values stated in EXHIBIT I will be considered for award of the bid. The DOA/ORM reserves the right to award the bid for the option which provides the highest limit of coverage at the lowest premium within the individual budget agency(ies) allocated funding, if applicable.
- 1.7** Blank
- 1.8** A contract or order resulting from this invitation **shall** be awarded in response to a bid providing the lowest responsible and responsive bid to the *State of Louisiana*.
- 1.9** Any award of the contract resulting from this invitation **shall** be made by written notification from ORM.
- 1.10** **As respects this bid, company name and signature of designated authorized representative of the insurance company shall be indicated on EXHIBIT III of these specifications. Submission of a bid bond in compliance with PART IV, Item 3 of these specifications does not eliminate the need for a company signature; however, the submission of a bid bond allows any authorized person from the company to sign the invitation in lieu of the designated authorized person.**

2. Pricing Information

- 2.1** The bidder/contractor **shall** provide fixed rates for services as required by the Technical Specifications. These costs **shall** be shown on the form attached as EXHIBIT I and EXHIBIT II, which **must** be returned with the proposal along with the entire IFB document.
- 2.2** The bidder/contractor **must** provide other information as required in EXHIBIT I.
- 2.3** The bidder's/contractor's quotation **shall** be based on the following:

2.3.1 Guaranteed Cost Plan - Any Proposal submitted by the bidder/contractor **must** be submitted on the form herein provided with the blank spaces filled in showing the annual premium based on the coverages reflected in PART IV of these specifications.

2.4 Percentage of commission return **shall** reflect that percentage of the total premium which will be returned to the State by the successful bidder/contractor, if applicable, and as allowed in Louisiana R.S. 39:1631 and Louisiana R.S. 39:1632.

2.5 Any increase and/or decrease in premiums during the policy period **shall** increase and/or decrease the amount of commission return to the same degree of percentage as the original commission return utilized in the net premium determination.

2.6 Annual/Anniversary premium **shall** be on a flat rate basis with no adjustments being made in a policy year for an increase or decrease in exposure units. However, subsequent anniversary billings will reflect any premium adjustments due to change in exposure units.

2.7 Blank

2.8 Blank

3. Bidder Information

3.1 As regards the insurance company and an incorporated insurance agency, the bidder/contractor shall attach either one of the following (Items 3.1.1 or 3.1.2) to the proposal:

3.1.1 Board resolution or power of attorney (with seal):

3.1.1.1 giving the designated authorized representative of the insurance agency authority to tender a premium quotation on behalf of the insurance agency.

3.1.1.2 giving the designated authorized representative of the insurance company authority to tender a premium quotation on behalf of the insurance company.

3.1.1.3 giving the designated authorized representative of the insurance agency authority to tender a premium quotation on behalf of the insurance company.

3.1.2 Bid bond in an amount equal to at least 10% of the Net Annual Installment Premium reflected on EXHIBIT I of these specifications or \$100,000, whichever is more. Bid bonds for 10% of *Net Annual Premium* can be rounded to nearest dollar.

3.2 As regards an unincorporated insurance agency (sole proprietor agency), the bidder/contractor shall attach either one of the following Items (3.2.1 or 3.2.2) to the proposal.

3.2.1 Notarized affidavit, board resolution or power of attorney (with seal):

3.2.1.1 giving documentation from the Louisiana Insurance Department reflecting proof of ownership of the agency.

3.2.1.2 giving the designated authorized representative of the insurance company authority to tender a premium quotation on behalf of the insurance company.

3.2.1.3 giving the designated authorized representative of the insurance agency authority to tender a premium quotation on behalf of the insurance company.

| | | | | | | |
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3.2.2 Bid bond in an amount equal to at least 10% of the Net Annual Installment Premium reflected on EXHIBIT I of these specifications or \$100,000, whichever is more. Bid bonds for 10% of Net Annual Premium can be rounded to nearest dollar.

3.3 The bidder/contractor **must** submit with its response to this IFB, a certificate of insurance showing proof of errors and omissions coverage on the agent and/or broker with limits of liability of at least \$1,000,000. This errors and omissions coverage must be maintained throughout the period of this contract.

3.4 The bidder/contractor **must** submit a narrative description of the claim service it proposes to provide. The narrative should include, but not necessarily limited to, a description of the claim handling procedures (routine processing) commencing with the date of loss, reaction time on claims and length of time before a claims payment will be made. The bidder/contractor **shall** be held contractually responsible for information provided in EXHIBIT IV.

4. Insurance Required

4.1 The contractor shall provide following form excess crime coverage(s) subject to the following:

4.1.1 ORM requires that the policy of insurance **shall** provide coverage equal to or exceeding the coverage provided in the underlying self-insurance policy (forms reflected in Schedule B of these specifications).

4.1.2 Limits/Schedule of Insurance required can be found in Schedule A of these specifications.

4.1.3 This excess coverage is subject to the limit of insurance specified (See Schedule A for various limits). The company agrees to pay those sums that the insured becomes legally obligated to pay (in damages) which are in excess of the limits of insurance afforded by the underlying self-insurance policy. No "retention or drop down" limit applies.

4.1.4 The policy of insurance **shall** also include the General and Special Required Endorsements reflected in PART II of these specifications.

5. Underwriting Information

5.1 Named Insured: "State of Louisiana, Various State Departments, Agencies, Boards and Commissions (As Scheduled) .

5.2 Effective Date: Coverage will commence at 12:01 on each insured effective date as reflected in these specifications and/or the inception date of new requests beginning July 01, 2002 with two (2) one-year options to continue at the same rates.

5.3 A copy of the underlying self-insurance policy forms and endorsements can be found in Schedule B of these specifications. The following endorsements do not apply to the policy to be issued as a result of the award of this contract.

Endorsement B (Deductible)
Endorsement F
Endorsement G

EXHIBIT I

BID QUOTATION FORM

The bidder/contractor proposes to furnish a policy providing following form excess commercial crime coverage insurance for the premium stated below for the *State of Louisiana*, Various State Departments, Agencies, Boards and Commissions (as scheduled) effective for the period of **12:01 A.M. July 01, 2002 to 12:01 A.M. July 01, 2003 with two (2) one-year options to continue at the same rates.**

| Agency Number and Name | | ¹ Total Annual Premium Installment | ² Less Commission Return (Per LA R.S. 39:1632) | Net Annual Premium Installment |
|------------------------|---|---|---|--------------------------------|
| 0500 | Dept of Transportation & Development – Statewide | \$ | \$ (%) | \$ |
| 0570 | Crescent City Connection Division | \$ | \$ (%) | \$ |
| 4010 | Commissioner of Insurance – Insurance Department | \$ | \$ (%) | \$ |
| 4418 | Louisiana State University – Baton Rouge | \$ | \$ (%) | \$ |
| 4438 | Louisiana State University – Alexandria | \$ | \$ (%) | \$ |
| 4458 | University of New Orleans | \$ | \$ (%) | \$ |
| 4483 | Louisiana State University Medical Center – Shreveport | \$ | \$ (%) | \$ |
| 4488 | Louisiana State University Medical Center – New Orleans | \$ | \$ (%) | \$ |
| 4498 | Louisiana State University – Eunice | \$ | \$ (%) | \$ |
| 4518 | Louisiana State University – Shreveport | \$ | \$ (%) | \$ |
| 4538 | Louisiana State University – Agriculture Center | \$ | \$ (%) | \$ |
| 4618 | Southern University – Baton Rouge | \$ | \$ (%) | \$ |

¹In the event the percentages of policy tax, or surplus lines tax or other taxes increase due to changed legislation, the bidder(s)/contractor(s) **shall** absorb the increases as the State cannot pay more than the amounts quoted on the successful bid except in the instances of increased coverage.

²For explanation refer to PART II - Technical Specifications, Subsection 1, General Specifications, Paragraph 1.10 and PART IV - General Bid Information, Subsection 2, Pricing Information, Paragraph 2.4. **Bidder/Contractor must reflect percentage of total premium which will be returned to the State.**

| | | | | | | |
|--------------|---|--------------------|---|-------------|---|----------|
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EXHIBIT I

BID QUOTATION FORM - CONTINUED

| Agency Number and Name | | ¹ Total Annual Premium Installment | ² Less Commission Return (Per LA R.S. 39:1632) | Net Annual Premium Installment |
|------------------------|--|---|---|--------------------------------------|
| 4858 | Grambling State University | \$ | \$ (%) | \$ |
| 4998 | Louisiana tech University | \$ | \$ (%) | \$ |
| 5038 | McNeese State University | \$ | \$ (%) | \$ |
| 5078 | The University of Louisiana at Monroe | \$ | \$ (%) | \$ |
| 5158 | Northwestern State University | \$ | \$ (%) | \$ |
| 5218 | Southeastern Louisiana University | \$ | \$ (%) | \$ |
| 5258 | University of Southwestern Louisiana | \$ | \$ (%) | \$ |
| 6700 | Isaac Delgado Community College | \$ | \$ (%) | \$ |
| 7775 | Criminal Court – Parish of Orleans | \$ | \$ (%) | \$ |
| 7780 | District Courts | \$ | \$ (%) | \$ |
| | | | | |
| | GRAND TOTALS | \$ | \$ (%) | \$ |

¹In the event the percentages of policy tax, or surplus lines tax or other taxes increase due to changed legislation, the bidder(s)/contractor(s) **shall** absorb the increases as the State cannot pay more than the amounts quoted on the successful bid except in the instances of increased coverage.

²For explanation refer to PART II - Technical Specifications, Subsection 1, General Specifications, Paragraph 1.10 and PART IV - General Bid Information, Subsection 2, Pricing Information, Paragraph 2.4.
Bidder/Contractor must reflect percentage of total premium which will be returned to the State.

EXHIBIT II

RATES

- 1) The bidder/contractor shall indicate below the rate(s) per unit of exposure corresponding to premium indicated on EXHIBIT I.

| | | | | | | |
|--------------|---|--------------------------|---|-------------|---|----------|
| PROPOSAL NO. | * | INVITATION FOR BID | * | DATE | * | PAGE |
| | * | <i>EXHIBIT III</i> | * | | * | |
| CR-18 | * | <i>COMPANY SIGNATURE</i> | * | May 7, 2002 | * | 21 of 65 |
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EXHIBIT III

COMPANY SIGNATURE PAGE

INSURANCE COMPANY OR COMPANIES TO BE USED AND PERCENTAGE OR LAYER OF COVERAGE TO BE PROVIDED BY EACH: **(If additional space is required supplemental pages that are identified should be attached for insurance company name and signature)**

NOTE: See signature requirements per PART I, Item 6 and PART IV, Item 1.10.

Insurance Company Name: _____

Signature Of Designated Authorized Representative Of The Insurance Company:

Percentage Or Layer Of Coverage To Be Provided:

NOTE: Bidder/Contractor Must Answer the Following Questions:

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1) Is insurance company an assessable mutual company? ³ | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Is insurance company licensed to do business in Louisiana? ³ | <input type="checkbox"/> | <input type="checkbox"/> |

³See PART II, Item 1.1.2 of these specifications

| | | | | | | |
|--------------|---|--------------------|---|-------------|---|----------|
| PROPOSAL NO. | * | INVITATION FOR BID | * | DATE | * | PAGE |
| | * | EXHIBIT IV | * | | * | |
| CR-18 | * | CLAIMS HANDLING | * | May 7, 2002 | * | 22 of 65 |
| | | PROCESS NARRATIVE | | | | |

EXHIBIT IV

CLAIMS HANDLING PROCESS NARRATIVE

Bidders/Contractors **shall** respond to the following:

Provide a narrative description of the claims handling procedures (routine processing) to be used in servicing the account for following form excess commercial crime coverage. The description should include, but not be limited to, the routine processing of claims, the reaction time to a new loss, and the length of time before a claim's payment will be made. (If additional space is required, supplemental pages that are identified should be attached for the bidder's/contractor's complete response.)

| | | | | | | |
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| | * | EXHIBIT V | * | | * | |
| CR-18 | * | COVERAGE/SERVICES | * | May 7, 2002 | * | 23 of 65 |
| | | DEVIATIONS | | | | |

EXHIBIT V

COVERAGE AND/OR OTHER SERVICES DEVIATIONS

Bidder/Contractor shall indicate below any change or restriction in conditions, warranties, or exclusions from the following form excess commercial crime **coverage and/or other services required by these specifications**. Submission of sample policy and/or service narrative shall not be considered as compliance with above stipulations. Non-disclosure of changes/restrictions shall be interpreted to mean policy and/or other services to be provided will be in compliance with coverage and/or other services requested in these specifications.

EXHIBIT VI - NOT APPLICABLE TO THIS BID

EXHIBIT VII
BIDDER'S CHECK LIST

| YES | NO | |
|---|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Entire IFB returned (per page 6, item 6.2.5). |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Page 21 (EXHIBIT III) signed by designated authorized representative of the insurance company (per page 6, item 6.1.2 and page 15, item 1.10). |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Insurance Company Name has been indicated on Page 21 (EXHIBIT III) per page 15, item 1.10. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Form ORM-2 signed in ink by designated authorized representative of the insurance agency (per page 6, item 6.1.1). |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Amendment(s) (if applicable) signed in ink by designated authorized representative of the insurance agency (per page 6, item 6.1.1). |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Amendment(s) (if applicable) returned (per page 6, item 6.2.5 and page 5, item 4.2). |
| NOTE: ITEMS 7A, 7B, AND 7C; <u>OR</u> 8A, 8B, AND 8C; <u>OR</u> 9 IS REQUIRED. | | |
| <input type="checkbox"/> | <input type="checkbox"/> | 7A. Board resolution/power of attorney (per page 16, item 3.1.1.1) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 7B. Board resolution/power of attorney (per page 16, item 3.1.1.2) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 7C. Board resolution/power of attorney (per page 16, item 3.1.1.3) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 8A. Notarized affidavit, board resolution/power of attorney (per page 16, item 3.2.1.1) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 8B. Notarized affidavit, board resolution/power of attorney (per page 16, item 3.2.1.2) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 8C. Notarized affidavit, board resolution/power of attorney (per page 16, item 3.2.1.3) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Bid Bond (per page 16, item 3.1.2 or page 17, item 3.2.2) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Claims narrative submitted (per page 17, item 3.4 and page 22, EXHIBIT IV). |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Were any coverage and/or other services deviations submitted on page 23, EXHIBIT V (per page 15, item 1.3)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Does insurance company have current Best Rating of "A++", "A+", "A" or "A-", Class VIII or higher (Per page 9, item 1.1.2)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Were premium rates indicated on EXHIBIT II, page 20 (per page 13, item 7.1 and page 15, item 2.1)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Errors and Omissions Certificate (per page 17, item 3.3) is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. Were premium quotations indicated on EXHIBIT I, page 18 (per page 15, items 2.1 and 2.2)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. Was commission return percentage factor reflected on EXHIBIT I, page 18 (per page 16, item 2.4)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. Are responses to questions on EXHIBIT III, page 21 in compliance with requirements in Item 1.1.2 on page 9? |

| | | | | | | |
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| | | <i>Information</i> | | | | |

SCHEDULE A

UNDERWRITING INFORMATION

This schedule contains earned premium and loss experience information for the past five (5) years as well as a schedule reflecting limits of insurance required.

I. EARNED PREMIUM AND LOSS EXPERIENCE INFORMATION

| POLICY YEAR | TOTAL NUMBER OF CLAIMS INCURRED | TOTAL NUMBER OF CLAIMS CLOSED | ¹ TOTAL NET SELF-INSURED CLAIMS INCURRED | TOTAL LOSSES INCURRED BY EXCESS CARRIER | EXCESS PREMIUM PAID |
|-----------------------------------|---------------------------------|-------------------------------|---|---|---------------------|
| 07-01-96/97 | 6 | 6 | \$13,125.00 | -0- | \$49,729.00 |
| 07-01-97/98 | 3 | 3 | \$2,083.00 | -0- | \$41,789.00 |
| 07-01-98/99 | 1 | 1 | \$1,626.00 | -0- | \$41,599.00 |
| 07-01-99/00 | 2 | 1 | \$5,970.00 | -0- | \$41,903.00 |
| 07-01-00/01 | 4 | 1 | \$2,377.00 | -0- | \$28,804.00 |
| 07-01-01/02 | 0 | 0 | -0- | -0- | \$28,804.00 |
| ¹ As of March 21, 2002 | | | | | |

II. INDIVIDUAL CLAIM INFORMATION

07-01-1996/97

| <u>Date of Loss</u> | <u>State Agency Number & Name</u> | <u>Description of Claim</u> | <u>Net Claim</u> |
|---------------------|--|--|------------------|
| 08-04-96 | 3153 Chicot State Park | Money stolen from safe at entrance bldg – Access gained through sheetrock wall | \$4,252.00 |
| 08-05-96 | 7775 Orleans Parish Criminal Court | Cash disappeared from collection department | \$820.00 |
| 10-21-96 | 2150 Prison Enterprises | Cash stolen from petty cash box at farm office | \$0.00 |
| 01-20-97 | 6330 T. H. Harris Campus | cash stolen from cash box – 4 doors and windows broken | \$597.00 |
| 02-14-97 | 2240 DPS – Motor Vehicles | Safe damaged and cash stolen | \$6,662.00 |
| 04-02-97 | 4460 University of New Orleans – Metro College | Laptop and cash stolen during armed robbery | \$794.00 |

07-01-1997/98

| <u>Date of Loss</u> | <u>State Agency Number & Name</u> | <u>Description of Claim</u> | <u>Net Claim</u> |
|---------------------|--|--|------------------|
| 07-13-97 | 3174 North Toledo Bend Park | Safe & some cash stolen from fee station | \$1,834.00 |
| 04-30-98 | 4630 Southern University – Baton Rouge | Cash stolen from meat processing | \$249.00 |
| 06-30-98 | 4420 Louisiana State University – Continuing Education | Student employee short | \$0.00 |

| | | | | | | |
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INDIVIDUAL CLAIM INFORMATION (Continued)

07-01-1998/99

| <u>Date of Loss</u> | <u>State Agency Number & Name</u> | <u>Description of Claim</u> | <u>Net Claim</u> |
|---------------------|---------------------------------------|--------------------------------------|------------------|
| 10-02-98 | 5080 Northeast Louisiana University | Cash stolen from safe at Chick-Fil-A | \$1,626.00 |

07-01-1999/2000

| <u>Date of Loss</u> | <u>State Agency Number & Name</u> | <u>Description of Claim</u> | <u>Net Claim</u> |
|---------------------|---------------------------------------|--|------------------|
| 12-10-99 | 2955 Louisiana Tax Free Shopping | Forged check – City Bank South Africa bank made restitution | \$0.00 |
| 02-01-2000 | 3610 Louisiana State Treasurer | Four (4) deposit batches from Department of Transportation & Development lost in transit | \$5,970.00 |

07-01-2000/2001

| <u>Date of Loss</u> | <u>State Agency Number & Name</u> | <u>Description of Claim</u> | <u>Net Claim</u> |
|---------------------|---------------------------------------|---|------------------|
| 07-05-00 | 6660 LTC – North Central Campus | Safe damaged in school burglary | \$406.00 |
| 01-13-01 | 7215 New Orleans City Park | Golf pro shop robbed by armed thieves | \$694.00 |
| 03-12-01 | 4860 Grambling State University | Burglars damaged safe & building in attempted theft | \$760.00 |
| 05-30-01 | 0237 Gillis W. Long | Money stolen from safe during burglary | \$517.00 |

| | | | | | | |
|--------------|---|-----------------------------|---|-------------|---|----------|
| PROPOSAL NO. | * | INVITATION FOR BID | * | DATE | * | PAGE |
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III. LIMITS OF EXCESS COVERAGE REQUIRED

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE
BLANKET CRIME COVERAGE.**

| 0500 – Department of Transportation & Development - Statewide | | | |
|---|--|------------------|------------------|
| 1. The insurance provided by FORM B (Forgery or Alteration Coverage) shall apply as indicated below: | | | |
| | NUMBER COUNT OF EMPLOYEES | | |
| <i>Limits of Coverage</i> | <i>Class "A"</i> | <i>Class "B"</i> | <i>Class "C"</i> |
| \$950,000 | 1,240 | 438 | 4,065 |
| Class "A" Employees | All Executive, Administrative, Administrative Assistant, Accountant, Money Handler, and/or Bookkeeper employees. Including all Peace Officers, Campus Security Officers, Wardens, Superintendents and their Assistants, Toll Collectors, Toll Collector Supervisors, Commanding Officers and Property Book Officers. This also includes Board Members who are not required by statute to provide a "Public Official Bond". | | |
| Class "B" Employees | All Clerical Personnel and/or Persons who operate a vehicle for a cash fare. | | |
| Class "C" Employees | All other employees | | |

| 0570 – CRESCENT CITY CONNECTION DIVISION, DEPARTMENT OF TRANSPORTATION & DEVELOPMENT, New Orleans, Louisiana | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| Administrative Building 2001 Mardi Gras Blvd. New Orleans, LA | \$180,000 | \$ 20,000 | \$180,000 | \$ 20,000 | 1 | 1 | B |

| | | | | | | |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

| 4010 – COMMISSIONER OF INSURANCE – INSURANCE DEPARTMENT, Baton Rouge, Louisiana | | | | | | | |
|--|---|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| Capitol – North Fifth Street | \$25,000 | -0- | \$25,000 | -0- | 5 | 2 | C |

| 4418 – LOUISIANA STATE UNIVERSITY – BATON ROUGE, Baton Rouge, Louisiana | | | | | | | |
|--|--|-------------------------------------|---|-------------------------------------|-----------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messenger s | Parish | Safe |
| Baton Rouge Campus - Bursar's Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | F |
| Athletic Department -Business Office Stadium | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | B |
| Assembly Center | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | E |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | PERIOD | | FORM | FROM | TO | | |
| (a) Baton Rouge Campus - Bursar's Office | Nine (9) days of Summer Registration | | C & D - Section 1 and 2 | \$ 50,000 | \$450,000 | | |
| (b) Baton Rouge Campus - Bursar's Office | Fifteen (15) days of Spring and Fall Registration | | C & D - Section 1 and 2 | \$ 50,000 | \$450,000 | | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

| | | | | | | | |
|--|--|-------------------------------------|---|-------------------------------------|-----------------------------|-----------|------|
| 4438 – LOUISIANA STATE UNIVERSITY – ALEXANDRIA, Alexandria, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messenger s | Parish | Safe |
| Business Office | \$50,000 | -0- | \$50,000 | -0- | 1 | 2 | B |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | PERIOD | | | FORM | FROM | TO | |
| (a) Business Office | Four (4) days of Summer Registration | | | C & D Section1 and 2 | \$ 50,000 | \$250,000 | |
| (b) Business Office | Twelve (12) days of Spring and Fall Registration | | | C & D Section1 and 2 | \$ 50,000 | \$250,000 | |

| | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-----------------------------|--------|------|
| 4458 – UNIVERSITY OF NEW ORLEANS, New Orleans, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messenger s | Parish | Safe |
| Bursars Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 1 | G |
| University Center | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 1 | F |
| Lakefront Arena | \$125,000 | -0- | \$125,000 | -0- | 1 | 1 | F |

| | | | | | | |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

| 4458 – UNIVERSITY OF NEW ORLEANS, New Orleans, Louisiana (Continued) | | | | |
|--|--|---|--------------------------------------|------------|
| 2. IT IS AGREED THAT: | | | | |
| 2.1 | The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | |
| 2.2 | Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | |
| LOCATION | PERIOD | FORM | FROM | TO |
| (a) Bursar's Office | Nine (9) days of Summer Registration | C & D Section 1 and 2 | \$ 50,000 | \$450,000 |
| (b) Bursar's Office | Fifteen (15) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$450,000 |
| 3. IT IS AGREED THAT: | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| (a) Bursar's Office Nine (9) days of Summer Registration | C & D - Section 1 and 2 | \$ 70,000 | \$ 380,000 | \$ 450,000 |
| (b) Bursar's Office Fifteen (15) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 70,000 | \$ 380,000 | \$ 450,000 |

| 4483 – LOUISIANA STATE UNIVERSITY MEDICAL CENTER – SHREVEPORT, Shreveport, Louisiana | | | | | | | |
|---|--|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| Location of Premises | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | Number of Messengers | Parish | Safe |
| | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | | | |
| Business Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | B |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1 | The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | |
| 2.2 | Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | |
| LOCATION | PERIOD | FORM | FROM | TO | | | |
| Business Office | Five (5) days of Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 | | | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

4488 – LOUISIANA STATE UNIVERSITY MEDICAL CENTER – NEW ORLEANS (Includes School of Dentistry) New Orleans, Louisiana

1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:

SCHEDULE

FORM C
SECTION 1 & 2

FORM D
SECTION 1 & 2

| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
|--|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| Medical Center - New Orleans Business Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 1 | E |
| School of Dentistry Business Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 1 | H |

2. IT IS AGREED THAT:

- 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods.
- 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows:

| LOCATION | PERIOD | FORM | FROM | TO |
|---|--------------------------------------|--------------------------|-----------|-----------|
| (a) Medical Center - New Orleans- Business Office | Five (5) days of Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (b) Medical Center - New Orleans- Business Office | Four (4) days of Spring Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (c) School of Dentistry - Business Office | Two (2) days of Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (d) School of Dentistry - Business Office | Two (2) days of Spring Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |

4498 – LOUISIANA STATE UNIVERSITY – EUNICE, Eunice, Louisiana

1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:

SCHEDULE

FORM C
SECTION 1 & 2

FORM D
SECTION 1 & 2

| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
|----------------------|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| Business Office | \$10,000 | \$40,000 | \$10,000 | \$40,000 | 1 | 2 | C |

| | | | | | | |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE**

| | | | | |
|--|--|---|---|------------|
| 4498 – LOUISIANA STATE UNIVERSITY – EUNICE, Eunice, Louisiana (Continued) | | | | |
| 2. IT IS AGREED THAT: | | | | |
| 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | |
| 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | |
| LOCATION | PERIOD | FORM | FROM | TO |
| Business Office | Two (2) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$150,000 |
| 3. IT IS AGREED THAT: | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| Business Office Two (2) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 30,000 | \$ 120,000 | \$ 150,000 |

| | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-----------------------------|--------|------|
| 4518 - LOUISIANA STATE UNIVERSITY – SHREVEPORT, Shreveport, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messenger s | Parish | Safe |
| Business Office | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | E |
| Bookstore | \$ 50,000 | -0- | \$ 50,000 | -0- | 1 | 2 | F |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

4518 - LOUISIANA STATE UNIVERSITY – SHREVEPORT, Shreveport, Louisiana (Continued)

2. IT IS AGREED THAT:

- 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods.
- 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows:

| LOCATION | PERIOD | FORM | FROM | TO |
|---------------------|--|-----------------------|-----------|-----------|
| (a) Business Office | Four (4) days of Summer Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (b) Business Office | Six (6) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (c) Bookstore | Four (4) days of Summer Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |
| (d) Bookstore | Six (6) days of Spring and Fall Registration | C & D Section 1 and 2 | \$ 50,000 | \$250,000 |

4538 – LOUISIANA STATE UNIVERSITY – AGRICULTURAL CENTER, Baton Rouge, Louisiana

1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:

SCHEDULE

FORM C
SECTION 1 & 2

FORM D
SECTION 1 & 2

| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
|--|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| Livestock Show Office - John M. Parker Agricultural Center | \$50,000 | -0- | \$50,000 | -0- | 3 | 2 | B |

| | | | | | | |
|--------------|---|-----------------------------|---|-------------|---|----------|
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE.**

| 4618 – SOUTHERN UNIVERSITY – BATON ROUGE, Baton Rouge, Louisiana | | | | | | | |
|--|---|---|---|---|-------------------------|-------------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| FORM C SECTION 1 & 2 | | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| J.S. Clark Adm. Office | \$100,000 | -0- | \$100,000 | -0- | 2 | 2 | H |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | | PERIOD | | FORM | FROM | TO | |
| (a) | F. G. Clark Assembly Center | First one (1) week of Spring and Fall Registration | | C & D Section 1 | -0- | \$1,200,000 | |
| (b) | F. G. Clark Assembly Center | First two (2) days of Summer Registration | | C & D Section 1 | -0- | \$ 450,000 | |
| (c) | J. S. Clark Adm. Office | Second week of Spring and Fall Registration | | C & D Section 1 | \$100,000 | \$ 500,000 | |
| (d) | J. S. Clark Adm. Office | Second week of Spring and Fall Registration | | C & D Section 1 | \$100,000 | \$ 350,000 | |
| 3. IT IS AGREED THAT: | | | | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | | | | |
| Location of Premises | | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total | | |
| (a) | F. G. Clark Assembly Center – First week of Spring and Fall Registration | C & D Section 1 | \$ 400,000 | \$800,000 | \$1,200,000 | | |
| (b) | F. G. Clark Assembly Center – First two (2) days of Summer Registration | C & D Section 1 | \$ 250,000 | \$200,000 | \$ 450,000 | | |
| (c) | J. S. Clark Adm. Office – Second week of Spring and Fall Registration | C & D Section 1 | \$ 200,000 | \$300,000 | \$ 500,000 | | |
| (d) | J. S. Clark Adm. Office – Second week of Summer Registration | C & D Section 1 | \$ 200,000 | \$150,000 | \$ 350,000 | | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

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|---|---|----------------------------|------------------------------------|----------------------------|----------------------|-----------|------|
| 4858 - GRAMBLING STATE UNIVERSITY - GRAMBLING, LOUISIANA | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| FORM C SECTION 1 & 2 | | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| Cashier Function Office | \$5,000 | -0- | \$5,000 | -0- | 1 | 2 | B |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1. The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2. Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | PERIOD | | FORM | | FROM | TO | |
| (a) Registration Center | First three (3) days of Registration, and next fourteen (14) class days of Spring and Fall Registration | | C & D Section 1 and 2 | | \$ 5,000 | \$500,000 | |
| (b) Cashier Function Office | First day of Summer Registration | | C & D Section 1 and 2 | | \$ 5,000 | \$250,000 | |
| (c) Cashier Function Office | First seven (7) class days of Summer Registration | | C & D Section 1 and 2 | | \$ 5,000 | \$250,000 | |

| | | | | | | | |
|---|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| 4998 - LOUISIANA TECH UNIVERSITY, Ruston, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| FORM C SECTION 1 & 2 | | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| Comptroller's Office | \$ 40,000 | \$70,000 | \$ 50,000 | \$100,000 | 1 | 2 | C |
| Bookstore | \$ 25,000 | \$35,000 | \$ 20,000 | \$ 40,000 | 2 | 2 | C |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

| 4998 - LOUISIANA TECH UNIVERSITY, Ruston, Louisiana (Continued) | | | | |
|--|---|--------------------------------------|-----------------------------------|-------------|
| 2. IT IS AGREED THAT: | | | | |
| 2.1. The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | |
| 2.2. Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | |
| LOCATION | PERIOD | FORM | FROM | TO |
| (NOTE: Commencing one (1) day prior to the first day of each published formal start of student registration and to continue for fifteen (15) days hence for all four quarters as indicated below.) | | | | |
| (a) Fee Payment Center | During Registration (See Above Note) | C & D Section 1 and 2 | -0- | \$1,000,000 |
| (b) Comptroller's Office | During Registration (See Above Note) | C Section 1 and 2 | \$110,000 | \$800,000 |
| | | D Section 1 and 2 | \$150,000 | \$800,000 |
| (c) Bookstore | During Registration (See Above Note) | C & D Section 1 and 2 | \$60,000 | \$120,000 |
| 3. IT IS AGREED THAT: | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| (a) Comptroller's Office | C - Section 1 & 2 | \$40,000 | \$70,000 | \$110,000 |
| | D- Section 1 & 2 | \$50,000 | \$100,000 | \$150,000 |
| (b) Bookstore | C - Section 1 & 2 | \$25,000 | \$35,000 | \$60,000 |
| | D- Section 1 & 2 | \$20,000 | \$40,000 | \$60,000 |
| NOTE: Commencing one (1) day prior to the first day of each published formal start of student registration and to continue for fifteen (15) days hence for all four quarters as indicated below.) | | | | |
| (c) Fee Payment Center - (See Above Note) | C & D Section 1 & 2 | \$100,000 | \$900,000 | \$1,000,000 |
| (d) Comptroller's Office - (See Above Note) | C & D Section 1 & 2 | \$100,000 | \$700,000 | \$ 800,000 |
| (e) Bookstore - (See Above Note) | C & D Section 1 & 2 | \$ 30,000 | \$ 90,000 | \$ 120,000 |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE

5038 - MCNEESE STATE UNIVERSITY, Lake Charles, Louisiana

1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:

SCHEDULE

**FORM C
SECTION 1 & 2**

**FORM D
SECTION 1 & 2**

| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
|----------------------|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| Business Office | \$5,000 | -0- | \$5,000 | -0- | 1 | 2 | G |

2. IT IS AGREED THAT:

- 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods.
- 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows:

| LOCATION | PERIOD | FORM | FROM | TO |
|---------------------|---|-------------------------|----------|-----------|
| (a) Business Office | First Seven (7) days of Spring, Summer, and Fall Registration | C & D - Section 1 and 2 | \$ 5,000 | \$450,000 |
| (b) Business Office | A Period of four (4) days in Spring and Fall | C & D - Section 1 and 2 | \$ 5,000 | \$450,000 |
| (c) Parra Ballroom | First four (4) days of Spring, Summer, and Fall Registration | C & D - Section 1 and 2 | - 0 - | \$450,000 |
| (d) Bookstore | First week and Last Week of Spring & Fall Semesters | C & D - Section 1 and 2 | - 0 - | \$ 50,000 |

3. IT IS AGREED THAT:

With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule:

| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
|--|------------------------|--------------------------------------|-----------------------------------|-----------|
| (a) Business Office – First seven (7) days of Spring, Summer, and Fall Registration | C & D Section 1 & 2 | \$ 500 | \$449,500 | \$450,000 |
| (b) Business Office – A period of four (4) days of Spring and Fall Registration | C & D Section 1 & 2 | \$ 500 | \$449,500 | \$450,000 |
| (c) Holbrook Ranch – First four (4) days of Spring, Summer, and Fall Registration | C & D Section 1 & 2 | \$ 500 | \$449,500 | \$450,000 |
| (d) Bookstore First weekend last week of Spring and Fall Semesters | C & D Section 1 & 2 | \$ 55 | \$ 49,945 | \$ 50,000 |

| | | | | | | |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE.**

| 5078 – THE UNIVERSITY OF LOUISIANA AT MONROE, Monroe, Louisiana | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|----------|-------------------------|------|-------------------------|----|---|---|--------------------------|----------------------|---|---|---|-------------------------------------|-------------------------|-----------|---|---|--------------------------|-----------|-----------|--|--|--------------------------|-----|-----------|--|--|--------------------------|-----|-----------|---------------|---|--------------------------|-----|-----------|---------------|---|--------------------------|-----|-----------|
| <p>1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:</p> <p align="center">SCHEDULE</p> <table border="1"> <tr> <th></th> <th align="center" colspan="2">FORM C SECTION 1 & 2</th> <th align="center" colspan="2">FORM D SECTION 1 & 2</th> <th></th> <th></th> <th></th> </tr> <tr> <th>Location of Premises</th> <th>Money, Securities & Other Property</th> <th>Checks, Other Than Payroll</th> <th>Money, Securities & Other Property</th> <th>Checks, Other Than Payroll</th> <th>Number of Messengers</th> <th>Parish</th> <th>Safe</th> </tr> <tr> <td>Accounts Receivable Office (Indian Bank)</td> <td>\$100,000</td> <td>\$100,000</td> <td>\$100,000</td> <td>\$100,000</td> <td align="center">1</td> <td align="center">2</td> <td align="center">1</td> </tr> </table> | | | | | | | | | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | | | | Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe | Accounts Receivable Office (Indian Bank) | \$100,000 | \$100,000 | \$100,000 | \$100,000 | 1 | 2 | 1 | | | | | | | | | | | | | | | | |
| | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Accounts Receivable Office (Indian Bank) | \$100,000 | \$100,000 | \$100,000 | \$100,000 | 1 | 2 | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>2. IT IS AGREED THAT:</p> <p>2.3 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods.</p> <p>2.4 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows:</p> <table border="1"> <tr> <th>LOCATION</th> <th>PERIOD</th> <th>FORM</th> <th>FROM</th> <th>TO</th> </tr> <tr> <td>(a) Accounts Receivable Office - Indian Bank</td> <td>Three (3) weeks prior to first day of classes, and two (2) weeks from first day of classes forward of Spring and Fall Semesters</td> <td align="center">C & D Section 1 and 2</td> <td align="center">\$200,000</td> <td align="center">\$500,000</td> </tr> <tr> <td>(b) Accounts Receivable Office - Indian Bank</td> <td>Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semesters</td> <td align="center">C & D Section 1 and 2</td> <td align="center">\$200,000</td> <td align="center">\$400,000</td> </tr> <tr> <td>(c) Accounts Receivable Office - Indian Bank</td> <td>Four (4) separate one-day periods, each starting from first day of classes of Financial Aid Refunds to Students</td> <td align="center">C & D Section 1 and 2</td> <td align="center">\$200,000</td> <td align="center">\$400,000</td> </tr> <tr> <td>(d) Administration Building - Controller's Office</td> <td>Three (3) weeks prior to first day of classes, and one (1) week from first day of classes forward of Spring and Fall semesters</td> <td align="center">C & D Section 1 and 2</td> <td align="center">-0-</td> <td align="center">\$300,000</td> </tr> <tr> <td>(e) Administration Building - Controller's Office</td> <td>Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semester</td> <td align="center">C & D Section 1 and 2</td> <td align="center">-0-</td> <td align="center">\$150,000</td> </tr> <tr> <td>(f) Bookstore</td> <td>Two (2) days before classes begin, and first four (4) days of classes for book sales of Spring and Fall semesters</td> <td align="center">C & D Section 1 and 2</td> <td align="center">-0-</td> <td align="center">\$100,000</td> </tr> <tr> <td>(g) Bookstore</td> <td>Two (2) days before classes begin, and first four (4) days of classes for book sales of Summer semester</td> <td align="center">C & D Section 1 and 2</td> <td align="center">-0-</td> <td align="center">\$ 60,000</td> </tr> </table> | | | | | | | | LOCATION | PERIOD | FORM | FROM | TO | (a) Accounts Receivable Office - Indian Bank | Three (3) weeks prior to first day of classes, and two (2) weeks from first day of classes forward of Spring and Fall Semesters | C & D Section 1 and 2 | \$200,000 | \$500,000 | (b) Accounts Receivable Office - Indian Bank | Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semesters | C & D Section 1 and 2 | \$200,000 | \$400,000 | (c) Accounts Receivable Office - Indian Bank | Four (4) separate one-day periods, each starting from first day of classes of Financial Aid Refunds to Students | C & D Section 1 and 2 | \$200,000 | \$400,000 | (d) Administration Building - Controller's Office | Three (3) weeks prior to first day of classes, and one (1) week from first day of classes forward of Spring and Fall semesters | C & D Section 1 and 2 | -0- | \$300,000 | (e) Administration Building - Controller's Office | Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semester | C & D Section 1 and 2 | -0- | \$150,000 | (f) Bookstore | Two (2) days before classes begin, and first four (4) days of classes for book sales of Spring and Fall semesters | C & D Section 1 and 2 | -0- | \$100,000 | (g) Bookstore | Two (2) days before classes begin, and first four (4) days of classes for book sales of Summer semester | C & D Section 1 and 2 | -0- | \$ 60,000 |
| LOCATION | PERIOD | FORM | FROM | TO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (a) Accounts Receivable Office - Indian Bank | Three (3) weeks prior to first day of classes, and two (2) weeks from first day of classes forward of Spring and Fall Semesters | C & D Section 1 and 2 | \$200,000 | \$500,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (b) Accounts Receivable Office - Indian Bank | Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semesters | C & D Section 1 and 2 | \$200,000 | \$400,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (c) Accounts Receivable Office - Indian Bank | Four (4) separate one-day periods, each starting from first day of classes of Financial Aid Refunds to Students | C & D Section 1 and 2 | \$200,000 | \$400,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (d) Administration Building - Controller's Office | Three (3) weeks prior to first day of classes, and one (1) week from first day of classes forward of Spring and Fall semesters | C & D Section 1 and 2 | -0- | \$300,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (e) Administration Building - Controller's Office | Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semester | C & D Section 1 and 2 | -0- | \$150,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (f) Bookstore | Two (2) days before classes begin, and first four (4) days of classes for book sales of Spring and Fall semesters | C & D Section 1 and 2 | -0- | \$100,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (g) Bookstore | Two (2) days before classes begin, and first four (4) days of classes for book sales of Summer semester | C & D Section 1 and 2 | -0- | \$ 60,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE.

| 5078 – THE UNIVERSITY OF LOUISIANA AT MONROE, Monroe, Louisiana (Continued) | | | | |
|--|------------------------|--------------------------------------|-----------------------------------|-----------|
| 3. IT IS AGREED THAT: With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| Accounts Receivable Office/Indian Bank - Three (3) weeks prior to first day of classes, and two (2) weeks from first day of classes forward of Spring and Fall semesters | C & D Section 1 & 2 | \$200,000 | \$300,000 | \$500,000 |
| Accounts Receivable Office/Indian Bank - Two (2) weeks prior to first day of classes and one (1) week from first day of classes forward for Summer semester | C & D Section 1 & 2 | \$200,000 | \$200,000 | \$400,000 |
| Accounts Receivable Office/Indian Bank - Four (4) one-day periods, each starting from first day of classes of Financial Aid Refunds to Students | C & D Section 1 & 2 | \$100,000 | \$300,000 | \$400,000 |
| Administration Building/Controller's Office - Three (3) weeks prior to first day of classes, and one (1) week from first day of classes forward of Spring and Fall semesters | C & D Section 1 & 2 | -0- | \$300,000 | \$300,000 |
| Administration Building/Controller's Office - Two (2) weeks prior to first day of classes, and one (1) week from first day of classes forward of Summer semester | C & D Section 1 & 2 | -0- | \$150,000 | \$150,000 |
| Bookstore - Two (2) days before classes begin, and first four (4) days of classes for book sales of Spring and Fall semesters | C & D Section 1 & 2 | -0- | \$100,000 | \$100,000 |
| Bookstore - Two (2) days before classes begin, and first four (4) days of classes for book sales of Summer semesters | C & D Section 1 & 2 | -0- | \$ 60,000 | \$ 60,000 |

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|--------------|---|-----------------------------|---|-------------|---|----------|
| PROPOSAL NO. | * | INVITATION FOR BID | * | DATE | * | PAGE |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE.**

| 5078 – THE UNIVERSITY OF LOUISIANA AT MONROE, Monroe, Louisiana (Continued) | | |
|---|---|--|
| 4. General Information Relative to the University of Louisiana at Monroe | | |
| | An Indian Bank employee and an armed university police officer in a university policy car transmit daily deposits from the University to the bank. They also deliver cash and change requirements at the time of their visit to the Accounts Receivable Office, the Bookstore, and the Games Area. All three offices are located within the Student Union Building. When it is necessary to transport unusually large amounts, then armed campus security personnel are called in to provide escort service. University policy provide required security during each several day period during each registration. | |
| Budget Unit | Building | Other Information |
| Accounts Receivable | Union Building | Safe is inside a vault protected by motion sensing burglar alarm, which is tied to the University Police office by telephone lines. Security cameras are strategically located inside Indian Bank lobby and receivables area. |
| University Bookstore | Bookstore – located in the Union Bldg. | Building is protected by contract type and motion-sensing type burglar alarms both tied into University Police by telephone lines. Bowling Alley-Games Area Union Building located in office of manager. The Bookstore has installed ceiling mounted cameras and a magnetic sensing device at the entrance/exit door. Both are designed for internal use only to help deter shoplifting. |
| Athletic Ticket Office | Coliseum | Two (2) safes are utilized in the newly constructed ticket office. The older double-door record storage safe is used for ticket storage |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE

| | | | | | | | |
|--|--|----------------------------|--------------------------------------|-----------------------------------|----------------------|--------|------|
| 5158 - NORTHWESTERN STATE UNIVERSITY, Natchitoches, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | <i>FORM C</i> SECTION 1 & 2 | | <i>FORM D</i> SECTION 1 & 2 | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| St. Denis Hall | \$5,000 | -0- | \$5,000 | -0- | 2 | 2 | F |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1. The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2. Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | PERIOD | | FORM | FROM | TO | | |
| (a) St. Denis Hall | One (1) day prior to and four (4) days thereafter of Spring, Summer, and Fall Registration | | C & D Section 1 | \$ 5,000 | \$400,000 | | |
| 3. IT IS AGREED THAT: | | | | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | | | | |
| Location of Premises | | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total | | |
| (a) St. Denis Hall - One (1) day prior to and four (4) days thereafter of Spring, Summer, and Fall Registration | | C & D Section 1 | \$ 125,000 | \$275,000 | \$400,000 | | |

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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE**

| | | | | | | | |
|--|--|-------------------------------------|---|-------------------------------------|-------------------------|-------------|------|
| 5218 – SOUTHEASTERN LOUISIANA UNIVERSITY, Hammond, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> FORM C SECTION 1 & 2 </div> <div style="text-align: center;"> FORM D SECTION 1 & 2 </div> </div> | | | | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| Comptroller's/Cashier's Office | \$75,000 | -0- | \$75,000 | -0- | 3 | 2 | G |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.5 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.6 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| LOCATION | PERIOD | | FORM | | FROM | TO | |
| (a) Comptroller's/Cashier's Office | First seven (7) days of Spring, Summer, and Fall Registration | | C & D Section 1 and 2 | | \$ 50,000 | \$1,500,000 | |
| (b) Comptroller's/Cashier's Office | Next fourteen (14) days of Spring, Summer, and Fall Registration | | C & D Section 1 and 2 | | \$ 50,000 | \$ 750,000 | |
| (c) North Campus/Enrollment Services Office | First four (4) days of Spring, Summer, and Fall "Regular" Registration | | C & D Section 1 and 2 | | \$ 0 | \$ 50,000 | |
| (d) North Campus/Enrollment Services Office | Next four (4) days of Spring, Summer, and Fall "Late" Registration | | C & D Section 1 and 2 | | \$ 0 | \$ 50,000 | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE

| 5218 – SOUTHEASTERN LOUISIANA UNIVERSITY, Hammond, Louisiana | | | | |
|--|--------------------------|--------------------------------------|-----------------------------------|-------------|
| 3. IT IS AGREED THAT: With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| Comptroller/Cashier's Office - First seven (7) days of Spring, Summer, and Fall Registration | C & D Section 1 and 2 | \$ 200,000 | \$1,300,000 | \$1,500,000 |
| Comptroller/Cashier's Office - Next fourteen (14) days of Spring, Summer, and Fall Registration | C & D Section 1 and 2 | \$ 200,000 | \$ 550,000 | \$ 750,000 |
| North Campus/Enrollment Services Office - First four (4) days of Spring, Summer, and Fall "Regular" Registration | C & D Section 1 and 2 | \$ 40,000 | \$ 10,000 | \$ 50,000 |
| North Campus/Enrollment Services Office - Next four (4) days of Spring, Summer, and Fall "Late" Registration | C & D Section 1 and 2 | \$ 40,000 | \$ 10,000 | \$ 50,000 |

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| | | | | | | | |
|--|---|---|---|-------------------------------------|-----------------------------|--------|------|
| 5258 – UNIVERSITY OF LOUISIANA AT LAFAYETTE, Lafayette, Louisiana | | | | | | | |
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <i>FORM C</i> SECTION 1 & 2 </div> <div style="text-align: center;"> <i>FORM D</i> SECTION 1 & 2 </div> </div> | | | | | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messenger s | Parish | Safe |
| Business Affairs Office | \$ 175,000 | \$ 125,000 | -0- | -0- | 2 | 2 | C |
| Cashiers Center | \$ 450,000 | - 0 - | - 0 - | - 0 - | 2 | 2 | F |
| 2. IT IS AGREED THAT: | | | | | | | |
| 2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods. | | | | | | | |
| 2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows: | | | | | | | |
| | LOCATION | PERIOD | FORM | FROM | TO | | |
| (a) | Business Affairs Office | First five (5) days of Registration and first ten (10) class days of Spring, Summer, and Fall semesters | C & D Section 1 | \$ 300,000 | \$ 1,000,000 | | |
| (b) | Business Affairs Office | First five (5) days of Registration and first ten (10) class days of Spring, Summer, and Fall semesters | C & D Section 2 | -0- | \$ 200,000 | | |
| (c) | Bookstore | First five (5) days of Registration and first five (5) days of Spring, Summer, and Fall semesters | C & D Section 1 and 2 | -0- | \$ 450,000 | | |
| (d) | Cashier's Center | First five (5) days of Registration and first five (5) class days of Spring, Summer, and Fall semesters | C & D Section 1 and 2 | \$ 450,000 | \$ 1,500,000 | | |

LIMITS OF EXCESS COVERAGE REQUIRED (continued)

ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET CRIME COVERAGE

5258 – UNIVERSITY OF LOUISIANA AT LAFAYETTE, Lafayette, Louisiana (Continued)

3. IT IS AGREED THAT:

With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule:

| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
|--|--------------------------|--------------------------------------|-----------------------------------|--------------|
| (a) Business Affairs - First five (5) days of Registration and first ten (10) class days of Spring, Summer, and Fall semesters | C & D Section 1 | \$ 700,000 | \$ 300,000 | \$ 1,000,000 |
| (b) Business Affairs - First five (5) days of Registration and first ten (10) class days of Spring, Summer, and Fall semesters | C & D Section 2 | \$ 100,000 | \$ 100,000 | \$ 200,000 |
| (c) Bookstore - First five (5) days of Registration and first five (5) class days of Spring, Summer, and Fall semesters | C & D Section 1 and 2 | \$ 200,000 | \$ 250,000 | \$ 450,000 |
| (d) Cashier's Center - First five (5) days of Registration and first five (5) class days of Spring, Summer, and Fall semesters | C & D Section 1 and 2 | \$ 650,000 | \$ 850,000 | \$ 1,500,000 |

6700 – ISAAC DELGADO COMMUNITY COLLEGE, New Orleans, Louisiana

1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below:

SCHEDULE

| Location of Premises | FORM C SECTION 1 & 2 | | FORM D SECTION 1 & 2 | | Number of Messengers | Parish | Safe |
|----------------------|------------------------------------|----------------------------|------------------------------------|----------------------------|----------------------|--------|------|
| | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | | | |
| Bursar office | \$5,000 | \$5,000 | \$5,000 | \$5,000 | 1 | 1 | 1 |

2. IT IS AGREED THAT:

2.1 The amount of insurance under FORM C and FORM D hereinafter specified is increased for the period designated as to loss through acts committed or events occurring during such designated periods.

2.2 Coverage will be increased during the registration periods commencing the first day of each published formal start of student registration. Coverage is increased as follows:

| LOCATION | PERIOD | FORM | FROM | TO |
|-------------------|--|--------------------------|----------|-----------|
| (a) Bursar Office | First two (2) weeks of Registration of Spring and Fall semesters | C & D Section 1 and 2 | \$25,000 | \$350,000 |
| (b) Bursar Office | Next two (2) weeks of Registration of Spring Registration | C & D Section 1 and 2 | \$25,000 | \$350,000 |

| | | | | | | |
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LIMITS OF EXCESS COVERAGE REQUIRED (continued)

**ALL LIMITS REFLECTED ARE EXCESS OVER THE \$50,000 SELF-INSURANCE BLANKET
CRIME COVERAGE**

| 6700 – ISAAC DELGADO COMMUNITY COLLEGE, New Orleans, Louisiana (Continued) | | | | |
|--|-----------------------------|---|---|------------|
| 3. IT IS AGREED THAT: | | | | |
| With respect to loss at or in relation to the Premises designated below, the insurance under FORM C and FORM D for Money, Securities and Other Property, and for Checks, other than checks intended solely for the payroll of the Insured, applies subject to the amended limits of the Company's liability respectively stated in the following Schedule: | | | | |
| Location of Premises | Form | Money, Securities and Other Property | Checks, Other Than Payroll Checks | Total |
| (a) Bursar Office - First two (2) weeks of Registration of Spring and Fall Registration | C & D Section 1 and 2 | \$ 125,000 | \$ 200,000 | \$ 350,000 |
| (b) Bursar Office - Next two (2) weeks of Registration of Spring Registration | C & D Section 1 and 2 | \$ 125,000 | \$ 200,000 | \$ 325,000 |

| 7775 – CRIMINAL COURT/PARISH OF ORLEANS, New Orleans, Louisiana | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| 2700 Tulane Avenue | \$50,000 | -0- | \$50,000 | -0- | 2 | 1 | B |

| 7780 – DISTRICT COURT, New Orleans, Louisiana | | | | | | | |
|---|---|-------------------------------------|---|-------------------------------------|-------------------------|--------|------|
| 1. The insurance provided by FORM C (Theft, Disappearance, and Destruction Coverage) and FORM D (Robbery and Safe Burglary Coverage) shall apply as indicated below: | | | | | | | |
| SCHEDULE | | | | | | | |
| | FORM C SECTION 1 & 2 | | | FORM D SECTION 1 & 2 | | | |
| Location of Premises | Money, Securities & Other Property | Checks, Other Than Payroll | Money, Securities & Other Property | Checks, Other Than Payroll | Number of Messengers | Parish | Safe |
| 2700 Tulane Avenue | \$50,000 | -0- | \$50,000 | -0- | 1 | 1 | B |

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| | | and Endorsements | | | | |

SCHEDULE B

POLICY FORMS AND ENDORSEMENTS

This schedule contains policy forms and endorsements which reflect the minimum coverage which will be accepted for award of this IFB.

In the event of any discrepancies between the insurance requirements delineated in these specifications and the model policy(ies) included herein, the bid specifications **shall** govern.

This schedule is for informational purposes only and not to be used in awarding the contract.

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State of Louisiana

*Office of Risk Management
Self Insurance Fund*

*Office of the Governor
Division of Administration*

CRIME POLICY DECLARATIONS

| | | | | | | |
|----------------------------------|--|-------------------------|--|--------------|------------|--------------|
| Named Insured And Address | State of Louisiana, All Agencies, Boards and Commissions C/o Office of Risk Management Post Office Box 94095, Capitol Station Baton Rouge, Louisiana 70804-9095 | Certificate No.: | CRIM20022003 | | | |
| | | Policy Period: | Noon, Standard Time At Place Of Issuance | | | |
| | | | From: | July 1, 2002 | To: | July 1, 2003 |

COVERAGE, LIMITS OF INSURANCE AND DEDUCTIBLE

| COVERAGE FORMS FORMING PART OF THIS POLICY | | LIMIT OF INSURANCE | DEDUCTIBLE AMOUNT |
|--|--|--------------------|-------------------|
| Crime General Provisions (CR 10 00 10 90) | | | |
| FORM B - | Forgery or Alteration Coverage Form..... (CR 00 03 01 86) | \$50,000.00 | \$250.00 |
| FORM C - | Theft, Disappearance and Destruction Coverage Form | | |
| | Section 1 – Inside the Premises..... | \$50,000.00 | \$250.00 |
| | Section 2 – Outside the Premises..... (CR 00 04 10 90) | \$50,000.00 | \$250.00 |
| FORM D - | Robbery and Safe Burglary Coverage Form | | |
| | Section 1 – Inside the Premises..... | \$50,000.00 | \$250.00 |
| | Section 2 – Outside the Premises..... (CR 00 05 10 90)) | \$50,000.00 | \$250.00 |

FORMS/SCHEDULES FORMING PART OF THIS BOND/POLICY

| | | | | |
|----------------|----------------|--------|--------|-------------------|
| CR 00 03 01 86 | CR 00 05 10 90 | UND-01 | UND-03 | ENDORSEMENT A - C |
| CR 00 04 10 90 | CR 10 00 06 95 | UND-02 | UND-04 | |

IN RETURN FOR PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THE PARTIES AGREE THAT THIS CONTRACT IS SUBJECT TO AND CONDITIONED UPON THE AVAILABILITY AND APPROPRIATION OF THE FUNDS NECESSARY FOR ANY AND ALL AMOUNTS THAT MAY BE DUE IN ACCORD WITH THE PROVISIONS HEREIN.

*THIS POLICY IS SUBJECT TO COST ALLOCATION
PLAN OF OFFICE OF RISK MANAGEMENT (ORM).*

(Authorized Representative)

COMMERCIAL CRIME
CR 10 00 06 95

CRIME GENERAL PROVISIONS

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is or is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations. The words "we", "us" and "our", refer to the Company providing this insurance.

Words and phrases in quotation, marks are defined in the policy.

Unless stated otherwise in any Crime Coverage Form, Declarations or endorsement, the following General Exclusions, General Conditions and General Definitions, apply to all Crime Coverage Forms forming part of this policy.

A. GENERAL EXCLUSIONS

We will not pay for loss as specified below:

1. **Acts Committed by You or Your Partners:** Loss resulting from any dishonest or criminal act committed by you or any of your partners whether acting alone or in collusion with other persons. ,
2. **Governmental Action:** Loss resulting from seizure or destruction. of property by order of governmental authority.
3. **Indirect Loss:** Loss that is an indirect result of any act or "occurrence" covered by this insurance including, but not limited to, loss resulting from:
 - a. Your inability to, realize income that you would have realized had there 'been no loss of, or loss from damage to, Covered Property.
 - b. Payment of damages of any type for which you are legally liable. But we will pay compensatory damages arising directly from a loss covered under this Insurance.
 - c. Payment of costs, fees or other expenses you incur in establishing either the existence or the amount of loss under this insurance.
4. **Legal Expenses:** Expenses related to any legal action.
5. **Nuclear:** Loss resulting from nuclear reaction, nuclear radiation, or radioactive contamination, or any related act or incident.
6. **War and Similar Actions:** Loss resulting from war, whether or not declared, warlike action, insurrection, rebellion or revolution, or any related act or incident.

B. GENERAL CONDITIONS

1. **Concealment, Misrepresentation or Fraud:** This insurance is void in any case of fraud by you as it relates to this insurance at any time. It is also void if you or any other insured, at any time, intentionally conceal or misrepresent a material fact concerning:
 - a. This insurance;
 - b. The Covered Property;
 - c. Your interest in the Covered Property; or
 - d. A claim under this insurance.
2. **Consolidation - Merger:** If through consolidation or merger with, or purchase of assets of, some other entity:
 - a. Any additional persons become "employees" or,
 - b. You acquire the use and control of any additional "premises";
 any, insurance afforded. for "employees" or "premises" also ,applies to those additional "employees" and "premises", but only if you:
 - a. Give us written notice within 30 days thereafter; and
 - b. Pay us an additional premium.
3. **Coverage Extensions:** Unless stated otherwise in the Coverage Form, our liability under any Coverage Extension is part of, not in addition to, the Limit of Insurance applying to the Coverage or Coverage Section:
4. **Discovery Period for Loss:** We will pay only for covered loss discovered no later than one year from the end of the policy period.
5. **Duties in the Event of Loss:** After you discover a loss or a situation that may result in loss of, or loss from damage to, Covered Property you must:
 - a. Notify us as soon as possible.
 - b. Submit to examination under oath at our request and give us a signed statement of your answers.
 - c. Give us a detailed, sworn proof of loss within 120 days.
 - d. Cooperate .with us in the investigation and settlement of any claim.

6. Joint Insured:

- a. If more than one Insured is named in the Declarations, the first named Insured will act for itself and for every other Insured for all purposes of this insurance. If the first named Insured ceases to be covered, then the next named Insured will become the first named Insured.
- b. If any Insured or partner or officer, of that Insured has knowledge, of any, information relevant to this insurance, that knowledge is considered knowledge of every Insured.
- c. An "employee" of any Insured is considered to be an "employee" of every Insured.
- d. If this insurance or any of its coverages is cancelled or terminated as to any Insured, loss sustained by that Insured is covered only if discovered no later than one year from the date of that cancellation or termination.
- e. We will not pay more for loss sustained by more than one Insured than the amount we would pay if all the loss had been sustained by one Insured.

7. Legal Action Against Us: You may not bring any legal action against us involving loss:

- a. Unless you have complied with all the terms of this' insurance; and
- b. Until 90 days after you have fled proof of loss with us; and
- c. Unless brought within 2 years from the date you discover the loss.

8. Liberalization: If we adopt any revision that would broaden the, coverage under this insurance without additional premium within 45 days prior to or during the policy period, the broadened coverage .will immediately apply to this insurance.

9. Loss Covered Under More Than One Coverage of This Insurance: If two or more coverages of this insurance apply to the same" loss, we will pay the lesser of:

- a. The actual amount of loss; or
- b. The sum of the limits of insurance applicable for those coverages.

10. Loss Sustained During Prior Insurance

- a. If you, or any predecessor in interest, sustained loss during the period of any prior insurance that you or the predecessor in interest could have recovered under that insurance except that the time within which to discover loss had expired, we will pay for it under this insurance, provided:

(1) This insurance became effective at the time of cancellation or termination of the prior insurance; and

(2) The loss would have been covered .by this insurance had it been in effect when the acts or events causing the loss were committed or occurred.

b. The insurance under this Condition is part of, not in addition to, the Limits of Insurance applying to this insurance and, is limited to the lesser of the amount recoverable under:

(1) This insurance as of its effective date; or

(2) The prior insurance had it remained in effect.

11. Loss Covered Under This Insurance and Prior Insurance Issued by Us or Any Affiliate: If any loss is covered:

a. Partly by this insurance; and

b. Partly .by any prior cancelled or terminated insurance that we or any affiliate had issued to you or. any predecessor in interest;

the most we will pay is the larger of the amount recoverable under this insurance or the prior insurance.

12. Non-Cumulation of Limit of Insurance: Regardless of the number of years this insurance. remains in force or the number of premiums paid no Limit of Insurance cumulates from year to year or period to period.

13. Other Insurance: This insurance does not apply to loss recoverable or recovered under other insurance or indemnity. However, if the limit of the other, insurance or indemnity is insufficient to cover the entire amount of the loss, this insurance will apply to that part of the loss; other than that, falling within any deductible amount, not recoverable or recovered under the other insurance or indemnity. However, this insurance wi11 not apply to the amount of loss that is. more than the applicable Limit of insurance shown in the Declarations.

14. Ownership of Property; Interests Covered: The property covered under this insurance is limited to property:

a. That you own or hold; or

b. For, which you, are legally liable.

However, this insurance is for your benefit only, It provides no rights or benefits to any other person or organization.

15. Policy Period: ;

- a. The Policy Period is shown (in the Declarations.
- b. Subject to the loss Sustained During Prior Insurance condition we will pay only for loss that you sustain through acts committed or events occurring during the Policy Period.

16. Records: You must keep records of all Covered Property so we can verify the amount of any loss.

17. Recoveries:

- a. Any recoveries, less the cost of obtaining them, made after settlement of loss covered by this insurance will be distributed as follows:
 - (1) To you; until you are reimbursed for any loss that you sustain that, exceeds the Limit of Insurance and the Deductible Amount; if any;
 - (2) Then to us, until we are reimbursed for the settlement made;
 - (3) Then to you; until you are reimbursed for that part of the loss equal to the Deductible Amount, if any.
- b. Recoveries do not include any recovery:
 - (1) From insurance, suretyship, reinsurance, security or indemnity taken for our benefit; or
 - (2) Of original "securities" after duplicates of them have been issued.

18. Territory: This insurance: covers only acts committed or events occurring within the United States of America, U. S. Virgin Islands, Puerto Rico, Canal Zone, or Canada.

19. Transfer of Your Rights of Recovery Against Others to Us: You must transfer to us all your rights of recovery against any person or organization for any loss you sustained and for which we have paid or settled. You must also do everything necessary to secure those rights and do nothing after loss to impair them.

20. Valuation - Settlement:

- a. Subject to the applicable Limit of Insurance. provision we will pay for;
 - (1) Loss of "money" but only up to and including its face value. We may, at our option, pay for loss of "money" issued by any country other than the United States of America:
 - (a) At face value in the "money" issued by that country; or
 - (b) In the United States of America dollar equivalent determined by the rate. of exchange ,on the day the loss was discovered.
 - (2) Loss of "securities" but only up to and including their value at the close of business on the day the loss .was discovered. We may, at our option:
 - (a) Pay the value of such "securities" or replace them in kind, in which event you must assign to us all your rights, title and interest in and to those "securities"; or
 - (b) Pay the cost of any Lost Securities Bond required in connection with issuing duplicates of the "securities". However, we will be liable only for the payment of so much of the cost of the bond as would be charged for a bond having a penalty not exceeding the lesser of the:
 - (i) Value of the "securities" at the .close of business on the day the loss was discovered; or
 - (ii) Limit of Insurance.
 - (3) Loss of, or loss from damage to, "property other than money and securities" or loss from damage to the "premises" for not more than the:
 - (a) Actual cash value of the property on the day the loss was discovered;

(b) Cost of repairing the property or "premises"; or

(c) Cost of replacing the property with property of like kind; and quality.

We may, at our option, pay the actual cash value of the property or repair or replace it.

If we cannot agree with you upon the actual cash value or the cost of repair or replacement, the value or cost will be determined by arbitration.

b. We may at our option, pay for loss of, or loss from damage to, property other than "money":

(1) In the "money" of the country in which the loss occurred; or

(2) In the United States of America dollar equivalent of the "money" of the country in which the loss occurred determined by the rate of exchange on the day the loss was discovered.

c. Any property that we pay for or replace becomes our property.

C. GENERAL DEFINITIONS,

1. "Employee" means:

a. Any natural person:

(1) While in your service (and for 30 days after termination of service); and

(2) Whom you compensate directly by salary, wages or commissions; and

(3) Whom you have the right to direct and control while performing services for you; or

b. Any natural person employed by an employment contractor while that person is subject to your direction and control and performing services for, you excluding, however, any *such* person while having care and custody of property outside the "premises".

But "employee" does not mean any:

(1) Agent, broker, factor, commission merchant, consignee, independent contractor or representative of the same general character; or.

(2) Director or trustee except while performing acts coming within the scope of the usual duties of an employee.

2. "Money" means:

a. Currency, coins and bank notes in current use and having a face value; and

b. Travelers checks, register checks and money orders held for sale to the public.

3. "Property Other Than Money and Securities" means any tangible property other than "money" and "securities" that has intrinsic value but does not include any property listed in any Crime Coverage Form as Property Not Covered.

4. "Securities" means negotiable and non-negotiable, instruments or contracts representing either "money" or other property and includes:

a. Tokens, tickets, revenue and other stamps (whether represented by actual stamps or unused value in a meter) in current use; and

b. Evidences of debt issued in connection with credit or charge cards which cards are not issued by you;

but does not include "money".

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| | | POLICY FORMS | | | | |

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CAREFULLY.

POLICY CHANGE

POLICY NO.: **CRIM20022003**

POLICY CHANGE NO.: **1**

COVERAGE PARTS AFFECTED:

FORM NO. **CR 10 00 06 95** - Crime General Provisions

CHANGES:

Page 2 of 4, Item 13 - Other Insurance

The following verbiage replaces that previously shown in its entirety:

11. Other Insurance: This insurance is primary over any other insurance.

Page 2 of 4, Item 9, b.

The following verbiage is added:

"The occurrence limit is subject to a maximum of \$50,000."

Policy Changes Effective Date: **07-01-02**

UND-01

CC 102
(1-86)

CR 00 03 01 86

FORGERY OR ALTERATION COVERAGE FORM (Coverage Form B)

A. COVERAGE

We will pay for loss involving Covered Instruments resulting directly from the Covered Causes of Loss.

1. **Covered Instruments:** Checks, drafts, promissory notes, or similar written promises, orders or directions to pay a sum certain in "money" that are:

- a. Made or drawn by or drawn upon you;
 - b. Made or drawn by one acting as your agent;
- or that are purported to have been so made or drawn.

2. **Covered Causes Of Loss:** Forgery or alteration of, on or in any Covered Instrument.

3. **Coverage Extension**

Legal Expenses: If you are sued for refusing to pay any Covered Instrument on the basis that it has been forged or altered, and you have our written consent to defend against the suit, we will pay for any reasonable legal expenses that you incur and pay in that defense. The amount we will pay under this extension is in addition to the Limit of Insurance applicable to this insurance.

B. LIMIT OF INSURANCE

The most we will pay for loss in any one "occurrence" is the applicable Limit of Insurance shown in the Declarations.

C. DEDUCTIBLE

We will not pay for loss in any one "occurrence" unless the amount of loss exceeds the Deductible Amount shown in the Declarations. We will then pay the amount of loss in excess of the Deductible Amount, up to the Limit of Insurance. This provision does not apply to legal expenses paid under the Coverage Extension.

D. ADDITIONAL EXCLUSION, CONDITIONS AND DEFINITION

In addition to the provisions in the Crime General Provisions Form, this Coverage Form is also subject to the following:

1. **Additional Exclusion**

Acts of Employees, Directors, or Trustees:

We will not pay for loss resulting from any dishonest or criminal act committed by any of your "employees", directors, or trustees:

- a. Whether acting alone or in collusion with other persons;
- or
- b. Whether while performing services for you or otherwise.

2. **Additional Conditions**

- a. **Facsimile Signatures:** We will treat mechanically reproduced facsimile signatures the same as handwritten signatures.

- b. **General Amendment:** As respects this Coverage Form, the words Covered Property in the Crime General Provisions Form mean Covered Instruments.

- c. **Proof of Loss:** You must include with your proof of loss any instrument involved in that loss, or, if that is not possible, an affidavit setting forth the amount and cause of loss.

- d. **Territory:** We will cover loss you sustain anywhere in the world.

The Territory General Condition does not apply to this Coverage Form.

3. **Additional Definition**

"Occurrence" means all loss caused by any person or in which that person is involved, whether the loss involves one or more instruments



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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CAREFULLY.

POLICY CHANGE

POLICY NO.: **CRIM20022003**

POLICY CHANGE NO.: **2**

COVERAGE PARTS AFFECTED:

FORM NO. **CR 00 03 01 86** - Forgery or Alteration Coverage Form

CHANGES:

Page 1, Section D, Item 1 - Additional Exclusion

The following verbiage replaces that previously shown in its entirety:

- 1. Additional Exclusions:** We will not pay for loss as specified below:
 - a. Failure to Notify:** Loss of or damage to covered property believed to involve a violation of law for which Police were not notified as soon as possible.
 - b. Acts of Employees, Directors, or Trustees:** We will not pay for loss resulting from any dishonest or criminal act committed by any of your "employees", directors, or trustees.
 - (1) Whether acting alone or in collusion with other persons;
 - or
 - (2) Whether while performing services for you or otherwise.

Page 1, Section D, Item 2 - Additional Conditions

The following verbiage is *added*:

- e. Duties in the Event of Loss:** If you have reason to believe that any loss of, or loss from damage to, Covered Property involves a violation of law, you **must** notify the Police as soon as possible.

Policy Changes Effective Date: **07-01-02**

UND-02

COMMERCIAL CRIME
Coverage Form C

THEFT, DISAPPEARANCE AND DESTRUCTION COVERAGE FORM

A. COVERAGE - We will pay for loss of Covered Property resulting directly from the Covered Causes of Loss.

1. Section 1. - Inside. The Premises

a. Covered Property: "Money" and "securities" inside the "premises" or a "banking premises."

b. Covered Causes of Loss

- (1) "Theft"
- (2) Disappearance
- (3) Destruction

c. Coverage Extensions

(1) Containers of Covered Property:

We will pay for loss of, and loss from damage to, a locked safe, vault, cash register, cash box or cash drawer located in the "premises" resulting directly from an actual or attempted:

- (a) "Theft" of; or
- (b) Unlawful entry into those containers.

(2) Premises Damage: We will pay for loss from damage to the "premises" or its exterior resulting directly from an actual or attempted "theft" of Covered Property if you are the owner, of the "premises" or are liable for damage to it.

2. Section 2. - Outside the Premises .

a. Covered Property: "Money" and "securities" outside the "premises" in the care and custody of a "messenger."

b. Covered Causes of Loss

- (1) "Theft"
- (2) Disappearance
- (3) Destruction

c. Coverage Extension

Conveyance of Property By Armored Motor Vehicle Company: We will pay for loss of Covered Property resulting directly from the Covered Causes of Loss while outside the "premises" in the care and custody of an armored motor vehicle company.

But, we will pay only for the amount of loss that you cannot recover:

- (1) Under your contract with the armored motor vehicle company; and
- (2) From any insurance or indemnity carried by, or for the benefit of customers of, the armored motor vehicle company.

B. LIMIT OF INSURANCE

The most we will pay for loss in any one "occurrence" is the applicable Limit of Insurance shown in the DECLARATIONS.

C. DEDUCTIBLE

We will not pay for loss in any one "occurrence" unless the amount of loss exceeds the Deductible Amount shown in the DECLARATIONS. We will then pay the amount of loss in excess of the Deductible Amount, up to the Limit of Insurance. In the event more than one Deductible Amount could apply to the loss, only the highest Deductible Amount may be applied.

D. ADDITIONAL EXCLUSIONS, CONDITION AND DEFINITIONS: In addition to the provisions in the Crime General Provisions, this Coverage Form is subject to the following:

1. Additional Exclusions: We will not pay for loss as specified below:

- a. Accounting or Arithmetical Errors or Omissions:** Loss resulting from accounting or arithmetical errors or omissions.
- b. Acts of Employees, Directors, Trustees or Representatives:** Loss resulting from any dishonest or criminal act committed by any of your "employees," directors, trustees or authorized representatives:
 - (1) Acting alone or in collusion with other persons; or
 - (2) While performing services for you or otherwise.
- c. Exchanges or Purchases:** Loss resulting from the giving or surrendering of property in any exchange or purchase.
- d. Fire:** Loss from damage to the "premises" resulting from fire, however caused.

e. Money Operated Devices: Loss of property contained in any money operated device unless the amount of "money" deposited in it is recorded by a continuous recording instrument in the device.

f. Transfer or Surrender of Property

(1) Loss of property after it has been transferred or surrendered to a person or place outside the "premises" or "banking premises;"

(a) On the basis of unauthorized instructions; or

(b) As a result of a threat to do:

i. Bodily harm to any person; or

ii. Damage to any property.

(2) But, this exclusion does not apply under COVERAGE, Section 2, to loss of Covered Property while outside the "premises" or "banking premises" in the care and custody of a "messenger" if you:

(a) Had no knowledge of any threat at the time the conveyance began; or

(b) Had knowledge of a threat at the time the conveyance began, but the loss was not related to the threat.

g. Vandalism: Loss from damage to the "premises" or its exterior or to containers of Covered Property by vandalism or malicious mischief.

h. Voluntary Parting of Title to or Possession of Property: Loss resulting from your, or anyone acting on your express or implied authority, being induced by any dishonest act to voluntarily part with title to or possession of any property.

2. Additional Condition

Duties in the Event of Loss: If you have reason to believe that any loss of, or loss from damage to, Covered property involves a violation of law, you must notify the police.

3. Additional Definitions

a. "Banking Premises" means the interior of that portion of any building occupied by a banking institution or similar safe depository.

b. "Messenger" means you, any of your partners or any "employee" while having care and custody of the property outside the "premises."

c. "Occurrence" means an:

(1) Act or series of related acts involving one or more persons: or

(2) Act or event, or a series of related acts or events not involving any person.

d. "Premises" means the interior of that portion of any building you occupy in conducting your business.

e. "Theft" means any act of stealing.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CAREFULLY.

POLICY CHANGE

POLICY NO.: **CRIM20022003**

POLICY CHANGE NO.: **3**

COVERAGE PARTS AFFECTED:

FORM NO. **CR 00 04 10 90** - Theft, Disappearance and Destruction Coverage Form

CHANGES:

Page 1 of 2, Section D, Item 1 - Additional Exclusions, Conditions, and Definitions

The following verbiage is hereby *added*:

- i. **Failure to Notify:** Loss of or damage to covered property believed to involve a violation of law for which Police were not notified as soon as possible.

Page 2 of 2, Section D, Item 2 - Additional Conditions

The following verbiage *replaces* that previously shown in its entirety:

Duties in the Event of Loss: If you have reason to believe that any loss of, or loss from damage to, Covered Property involves a violation of law, you **must** notify the Police as soon as possible.

Policy Changes Effective Date: **07-01-02**

UND-03

COMMERCIAL CRIME
Coverage Form D

ROBBERY AND SAFE BURGLARY COVERAGE FORM - PROPERTY OTHER THAN MONEY AND SECURITIES

A. COVERAGE - We will pay for loss of, and loss from damage to, Covered Property resulting directly from the Covered Causes of Loss.

1. Section 1. - Inside The Premises

a. Robbery Of A Custodian

(1) Covered Property: "Property other than money and securities" inside the "premises" in the care and custody of a "custodian."

(2) Property Not Covered: Motor vehicles, trailers, or semi-trailers or equipment and accessories attached to them.

(3) Covered Cause of Loss: Actual, or attempted "robbery."

(4) Coverage Extension

Premises Damage: We will pay for loss from damage to the "premises" or its exterior resulting directly from the Covered Cause of Loss, if you are the owner of the "premises". or are liable for damage to it.

b. Safe Burglary

(1) Covered Property: "Property other than money and securities" inside the "premises" in a safe or vault.

(2) Covered Cause of Loss: Actual or attempted "safe burglary."

(3) Coverage Extension

Premises, Safe and Vault Damage: We will pay for loss from damage to:

(a) The "premises" or its exterior; or

(b) A locked safe or vault located inside the "premises;"

resulting directly from the Covered Cause of Loss, if you are the owner of the property or liable for damage to it.

2. Section 2. - Outside The Premises

a. Covered Property: "Property other than money and securities" outside the "premises" in the care and custody of a "messenger."

b. Property Not Covered: Motor vehicles, trailers or semi-trailers or equipment and accessories attached to them.

c. Covered Cause of Loss: Actual or attempted "robbery."

d. Coverage Extension

Conveyance Of Property By Armored Motor Vehicle Company: We will pay for loss of, and loss from damage to, Covered Property resulting directly from the Covered Cause of Loss while outside the "premises" in the care and custody of an armored motor vehicle company.

But, we will pay only for the amount of loss you cannot recover:

(1) Under your contract with the armored motor vehicle company; and

(2) From any insurance or indemnity carried by, or for the benefit of customers of, the armored motor vehicle company.

B. LIMIT OF INSURANCE

The most we will pay for loss in any one "occurrence" is the applicable Limit of Insurance shown in the DECLARATIONS.

C. DEDUCTIBLE

We will not pay for loss in any one "occurrence" unless the amount of loss exceeds the Deductible Amount shown in the DECLARATIONS. We will then pay the amount of loss in excess of the Deductible Amount up to the Limit of Insurance. In the event more than one Deductible Amount could apply to the loss, only the highest Deductible Amount may be applied.

D. ADDITIONAL EXCLUSIONS, CONDITIONS AND DEFINITIONS: In addition to the provisions in the Crime General Provisions, this Coverage Form is subject to the following:

1. Additional Exclusions: We will not pay for loss as specified below:

a. Acts of Employees, Directors, Trustees or Representatives: Loss resulting from any dishonest or criminal act committed by any of your "employees," directors, trustees or authorized representatives:

Acting alone or in collusion with other persons; or

(1) While performing services for you or otherwise.

b. **Fire:** Loss resulting from fire, however caused, except loss from damage to a safe or vault.

c. **Transfer or Surrender of Property**

(1) Loss of, or loss from damage to, property after it has been transferred or surrendered to a person or place outside the "premises:"

(a) On the basis of unauthorized instructions; or

(b) As a result of a threat to do:

i. Bodily harm to any person; or

ii. Damage, to any property.

(2) But, this exclusion does not apply under COVERAGE, Section 2. to loss of Covered Property while outside the "premises" in the care and custody of a "messenger" if you:

(a) Had no knowledge of any threat at the time the conveyance began; or

(b) Had knowledge of a threat at the time the conveyance began, but the loss was not related to the threat.

d. **Vandalism:** Loss from damage to any property by vandalism or malicious mischief.

2. **Additional Conditions**

a. **Duties in the Event of Loss:** If you have reason to believe that any loss of, or loss from damage to, Covered Property involves a violation of law, you must notify the police.

b. **Special Limit of Insurance. for Specified Property:** We will only pay up to \$5,000 for any one "occurrence". of loss of, and ,loss from damage to:

(1) Precious metals, precious or semiprecious. stones, pearls, furs, or completed or partially completed articles made of or containing such materials that constitute the principal value of such articles; or

(2) Manuscripts, drawings, or records of any kind or the cost of reconstructing them or reproducing any information contained in them.

3. **Additional Definitions**

a. **"Custodian"** means you, any of your partners or any "employee" while having care and custody of the property inside the "premises," excluding any person while acting as a "watchperson" or janitor,

b. **"Messenger"** means you, any of your partners or any "employee", while having care and custody of the property outside the "premises."

c. **"Occurrence"** means an:

(1) Act or series of related acts involving one or more persons; or

(2) Act or event, or a series of related acts or events not involving any person.

d. **"Premises"** means the interior of that portion of any building you occupy in conducting your business.

e. **"Robbery"** means the taking of property from the care and custody of a person by one who has:

(1) Caused or threatened to cause that person bodily harm; or

(2) Committed an obviously unlawful act witnessed by that person.

f. **"Safe Burglary"** means the taking of:

(1) Property from within a locked safe or vault by a person unlawfully entering the safe or vault as evidenced by marks of forcible entry upon its exterior; or

(2) A safe or vault from inside the "premises".

g. **"Watchperson"** means any person you retain specifically to have care and custody of property inside the "premises" and who has no other duties.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CAREFULLY.

POLICY CHANGE

POLICY NO.: **CRIM20022003**

POLICY CHANGE NO.: **4**

COVERAGE PARTS AFFECTED:

FORM NO. **CR 00 05 10 90** - Robbery and Safe Burglary Coverage Form - Property other than Money and Securities

CHANGES:

Page 1 of 2, Section D, Item 1 - Additional Exclusions

The following verbiage is *added*:

- e. Failure to Notify:** Loss of or damage to covered property believed to involve a violation of law for which Police were not notified as soon as possible.

Page 2 of 2, Section D, Item 2 - Additional Conditions

The following verbiage *replaces* that previously shown in its *entirety*:

- a. Duties in the Event of Loss:** If you have reason to believe that any loss of, or loss from damage to, Covered Property involves a violation of law, you **must** notify the Police as soon as possible.

Policy Changes Effective Date: **07-01-02**

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All Purpose Endorsement

Endorsement No. A
Policy No.: CRIM20022003

MISCELLANEOUS CHANGES

(This Endorsement Changes the Policy. Please Read Carefully.)

1. Territory

It is agreed that the term "Territory" as shown in this policy or on forms attached thereto is amended to read:

"Worldwide without restrictions"

2. Deductible

The Office of Risk Management (ORM) shall not be liable under Forms B, C and D on account of any loss, except to the extent such loss is in excess of Two Hundred Fifty Dollars and No Cents (\$250.00), with the insurance then applying to such excess only, subject otherwise to the applicable limit of the ORM's liability.

3. Record of Checks

It is agreed that the requirement of this policy as to the keeping of records by the insured will be amended by the addition of the following provision:

As respects checks negotiated to the insured, the record shall:

- (a) be made prior to the close of each business day;
- (b) each check will be stamped "For Deposit Only" immediately upon the negotiation;
- (c) include the names of the maker, payee and draw bank and the date and amount of the check; and
- (d) be maintained in a receptacle other than that used for money and securities.

4. Unauthorized Instruction

It is agreed that Forms C and D *do not* apply to loss of covered property, which has been transferred to a person or to a place outside the covered premises on the basis of **unauthorized** instructions.

5. Reduced Limit of Liability

It is agreed that, with respect to the insurance under Form C and Form C:

While the premises designated are not open for business and a custodian is not on duty therein, the limit of liability applicable to loss of Money or Securities within such premises is reduced to the applicable limit stated below:

| <u>Premises</u> | <u>Limit</u> |
|-----------------|--------------|
| All Locations | -0- |

The above limitations do **not** apply to losses sustained from a locked safe. A locked desk drawer or locked filing cabinet is **not** considered a locked safe.

EFFECTIVE DATE: 07-01-02

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All Purpose Endorsement

Endorsement No. B
Policy No.: CRIM20022003

EXCLUSIONS

(This Endorsement Changes the Policy. Please Read Carefully.)

It is agreed that the following agency(ies) is/are excluded from the policy. This cancellation of coverage is effective upon the inception date and time of aforementioned policy.

1. Louisiana State University
Tiger Athletic Foundation
2. Louisiana Stadium and
Exposition District (0250)

All other terms and conditions of this policy **shall** remain unchanged and in full force and effect.

EFFECTIVE DATE: 07-01-02

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All Purpose Endorsement

Endorsement No. C
Policy No.: CRIM20022003

REPORTING OF CRIME CLAIMS

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1. The State of Louisiana provides insurance coverage for this crime policy which includes money, securities and other property. All claims are to be reported in writing to the Office of Risk Management's Property Claim Unit, Post Office Box 94095, Baton Rouge, Louisiana 70804-9095.
 2. Information required to be submitted includes the following:
 - A. Name of insured agency;
 - B. Date of loss;
 - C. Location of loss;
 - D. Circumstances surrounding the occurrence;
 - E. Approximate value of loss; and
 - F. Name of person reporting claim, listing job title and telephone number.
 3. Claims are to be submitted in writing to the Office of Risk Management, Post Office Box 94095, Baton Rouge, Louisiana 70804-9095.
 4. Any objects and/or products which may have caused, contributed to, or which are suspected of causing an accident are to be retained and preserved as evidence.
 5. If a loss occurs or a claim arises, the agency is not to assume any obligation or incur any expenses without authority from the Office of Risk Management.

EFFECTIVE: 07-01-02